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STATUS AND CONCERNS OF WOMEN VETERANS

HEARING

BEFORE THE

SUBCOMMITTEE ON
OVERSIGHT AND INVESTIGATIONS

OF THE

COMMITTEE ON VETERANS' AFFAIRS
HOUSE OF REPRESENTATIVES

ONE HUNDREDTH CONGRESS

FIRST SESSION

APRIL 2, 1987

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STATUS AND CONCERNS OF WOMEN VETERANS

THURSDAY, APRIL 2, 1987

House of Representatives,
Subcommittee on Oversight and Investigations,
Committee on Veterans' Affairs,
Washington, D.C.

The subcommittee met, pursuant to notice, at 9:05 a.m., the Honorable Lane Evans (chairman of the subcommittee) presiding.

Present: Representatives Evans, Davis, Dornan, Stump, Edwards, Johnson, Applegate, and Montgomery.

OPENING STATEMENT CHAIRMAN EVANS

Mr. Evans. The subcommittee will come to order.

We are waiting for our first witness, Congresswoman Kaptur, who is on her way. We might start with opening statements and get the show on the road.

Welcome to the first hearing of the Subcommittee on Oversight and Investigations, for the 100th Congress. It's also my first hearing as chairman. It's been said that if savings in Government are to be realized, oversight is the key. If Government administration is to be improved, oversight is the key. And if services to our citizens are to be enhanced, then again oversight is the key.

Oversight can be used to achieve greater economy and efficiency in Government. It can be directed toward assuring the provision of essential services and needed benefits. In an era of scarce resources and unmet needs, oversight is a powerful and important tool. It is a tool we will use constructively and wisely.

Why do we conduct oversight? Oversight has many purposes: Identifying waste, fraud, inefficiency, and corruption; questioning arbitrary administrative actions; establishing priorities; evaluating Governmental programs; and gaining information needed to make informed decisions. For this subcommittee, oversight has one principal purpose, to serve our Nation's veterans, their spouses, and their dependents and survivors.

In recent years oversight activities by Congress have received increased recognition. In fact, oversight by Congress is as old as the Congress itself. Historians tell us that nearly two centuries ago, the very first Congress reviewed actions taken by the administration of President George Washington. This year as we recognize the Bicentennial of our Constitution, we intend to continue this important and essential tradition.

Today our Nation counts among her people more than 27 million veterans. Veterans, spouses, and dependents and survivors comprise fully one-third of the population of the United States, more than 79 million people.

To serve those who receive VA benefits and services, the Veterans' Administration consists of 172 medical centers, 227 outpatient clinics, 120 nursing home care units, 16 domiciliaries, 58 regional offices, 109 cemeteries, and numerous other facilities.

This year more than 1.4 million inpatients will receive care, and there will be more than 20 million outpatient visits. More than 240,000 employees provide the care, services and benefits which we think of as the VA. Our concerns are large and our efforts must not be any less.

The Subcommittee on Oversight and Investigations has a unique and challenging responsibility. During the 100th Congress, many subjects in many settings will be considered by this subcommittee. This subcommittee can accomplish much for our Nation's veterans. We have much to do. We are eager to begin.

The subject of our hearing today is women veterans. As a Nation, we love statistics. We collect statistics on almost everything. There are statistics on electricity used in aluminum smelting in major producing countries; estimated water use in selected countries, total, per capita and by sector, 1980; and the world catch of squid, and the world catch of antarctic krill, 1974 through 1982. But before 1980, no major survey by our Government even included a question about the veteran status of women. The census in 1980 marked the first time this information on women veterans was sought and collected. This single fact, perhaps better than any other, illustrates the reason for our hearing today.

In 1983 there were several more important developments. In March of that year our House Veterans' Affairs Subcommittee on Hospitals and Health Care conducted a hearing on VA health care for women veterans. In April of that year the VA Administrator established an internal advisory group of women veterans. On November 21, Public Law 98-160 was approved. This act of Congress directed the Administrator of Veterans' Affairs to establish the current advisory committee on women veterans as a permanent committee. This action assured women veterans that the committee could only be abolished by the Congress of the United States.

Today we want to review the record of women veterans. Currently women constitute 4.2 percent of the total veteran population, and there are estimated to be more than 1.1 million women veterans. Women now comprise 10.1 percent of our active duty forces, and during the last fiscal year women accounted for 12.2 percent of active duty enlistments. While the male population of veterans is declining, the number of women veterans is increasing.

What are the current status and concerns of women veterans? Are women veterans receiving equitable access to the benefits and services administered by the Veterans' Administration and other federal agencies? Are the present and anticipated future needs and concerns of women veterans being adequately addressed? These and others are the questions we will be asking today.

It is a pleasure for me now to recognize the ranking minority member of the subcommittee, Congressman Bob Stump of Arizona. Bob is a member of the Armed Services Committee, and is rejoining our committee this Congress after serving for 6 years on the House Intelligence Committee.

Bob, we want to welcome you back to the committee, and give you a special welcome as the ranking minority member of our subcommittee. We look forward to your contributions, and recognize you for any comments that you might wish to make at this time.

[The prepared statement of Chairman Evans appears at p. 63.]

OPENING STATEMENT OF HON. BOB STUMP

Mr. STUMP. Thank you, Mr. Chairman. My apologies for being late. There are several of us who have a firm commitment to the Thursday morning prayer breakfast, and it just ended, so we were a few minutes late.

The current status and concerns of women veterans is an important subject for this subcommittee to examine, and I commend you for calling this timely meeting.

I believe it is fair to say that constructive criticisms have been heard and heeded by the VA, and many of the problems have already been or are currently being acted upon.

It is clear that more remains to be done for women veterans, but it is equally clear that the VA and the Congress are firmly committed to providing benefits for all eligible veterans, both men and women alike.

Our hearing should tell us where we stand, and what remains to be done.

Thank you, Mr. Chairman.

[The prepared statement of Congressman Stump appears at p. 79.]

Mr. EVANS. Thank you, Bob.

We are very pleased to be joined by the chairman of the full committee, Chairman Montgomery, who is showing his strong interest in women veterans by coming and joining us today. He's a good leader on all veterans' issues, and we are pleased he could join us today. Mr. Chairman.

OPENING STATEMENT OF FULL COMMITTEE CHAIRMAN G.V. (SONNY) MONTGOMERY

Mr. MONTGOMERY. Thank you, Mr. Chairman. Congratulations to you and Mr. Stump and other members of the subcommittee for moving ahead with the women veterans and trying to gather more information.

As Don Edwards recalls, for years around here we didn't talk much about women veterans, nor did it show up in the Veterans' Administration programs, and I think this is a worthy cause. Congratulations.

[The prepared statement of Chairman Montgomery appears at p. 83.]

Mr. EVANS. Thank you, Mr. Chairman.

Any other members of the subcommittee? The gentleman from California.

OPENING STATEMENT OF HON. DON EDWARDS

Mr. **Edwards**. Well, thank you, Mr. Chairman, and I congratulate you on this initiative. I think this is a very important series of hearings that you are having, and I am glad that Mr. Montgomery, the distinguished Chairman and senior member of the Armed Services Committee, and Mr. Stump are here, too, because discrimination against women is not only in the Veterans' Administration, it is rampant in the U.S. Navy. Secretary Lehmann is No. 1 in discriminating against women, even though there are 46,000 loyal women sailors. His attitude is entirely different from the other Services. He has been taken before the EEOC three times by a woman civilian employee of the Navy whom he has refused to let serve even testing on a submarine, the specialist type of expert work that she has done. This is not as an officer of the submarine. And I think we have to watch in the future what's going to happen in the Navy, because the new Secretary of the Navy, Mr. Webb, has said, at a speech last year, that he doesn't think it's a good idea to have women in the Services. He doesn't think it's a good idea to have women in the academies. He says that that detracts from the attention that men should give to their duties. So this fits right in with the kind of work that I hope the Armed Services Committee and indeed the committees of Congress that have to do with civil rights and equal opportunity for women as well as men.

Mr. **Evans**. Thank you.

The gentleman from South Dakota is recognized.

OPENING STATEMENT OF HON. TIM JOHNSON

Mr. **Johnson**. Yes. Thank you, Mr. Chairman. I want to commend you also for holding this important hearing dealing with a critical issue before the country relative to the Nation's defense and fair treatment of veterans.

I am looking forward to listening to the testimony of Congresswoman Kaptur, who has been a real leader in veterans' issues and a real leader for women and people's issues generally. I'm looking forward to listening to the testimony from the women that are on our witness list today who have exhibited an enormous amount of leadership for this country in articulating the needs of veterans and a proper role for women in our Nation's defense. I think we have made a great deal of progress, but a great deal of progress remains to be made. I am looking forward to working closely with you, Mr. Chairman, and with the witnesses here in the future.

Mr. **Evans**. Thank you. I am very pleased also to be joined by my colleague from Illinois, Mr. Davis, who in being here is showing a strong Illinois interest and concern about women veterans.

STATEMENT OF HON. JACK DAVIS

Mr. **Davis**. Thank you, Mr. Chairman. I am delighted to be here. There are 45,000 women veterans from Illinois. I believe Illinois has the seventh largest population in the country of veteran women. It is obvious to me that all the taboos are falling as quickly as they can, and they have maybe not gone far enough. Certainly we will hear more about that today. I just returned from Europe, Mr. Chairman, and I can tell you that there are women, bright and capable, sparkly-eyed young women alongside of men over there working in the most difficult of circumstances with the toughest MOS's in the Army and the Air Force, doing an outstanding job. It's time for this kind of a hearing. I'm looking forward to Miss Kaptur's comments and to those of the witnesses, and I am delighted to be here with you.

Mr. Chairman, I congratulate you for calling this hearing.

Mr. EVANS. The Chair recognizes the ranking minority member of the subcommittee.

Mr. STUMP. Mr. Chairman, I have a full statement, and I'd like to unanimous consent for it to be inserted in the record. I cut it short in the interest of time.

Mr. EVANS. Without objection, so ordered.

[The prepared statement of Congressman Stump appears at p. 79.]

Mr. MONTGOMERY. Mr. Chairman, I'd also like to welcome Marcy Kaptur, but let me say that we'd like to welcome Major General Holm and Colonel Rossi to the committee, and we know the work of this VA advisory committee on women veterans has really done a tremendous job, it's active. Mack Fleming, the chief counsel on Veterans' Affairs, attended a hearing they had several days ago, and he said it's an outstanding advisory committee. I just wanted to have that on the record.

Mr. EVANS. Mr. Chairman, I don't know if you'll be here when they testify, so we ought to recognize them now. Please stand up for the traditional welcome of applause at our committee. If they'd stand up. Major General Holm.

[Applause.]

Mr. EVANS. I want to thank so many of my colleagues for being here today. I know they have pressing schedules, and they may not all be able to stay, but I do thank you for coming.

At this time we will receive the testimony of our witnesses. We are very pleased to have before our subcommittee as our first witness in the 100th Congress our friend and colleague Marcy Kaptur. Marcy is a member, of course, of the full committee, and Chairs the Subcommittee on Housing and Memorial Affairs. Marcy and I were both elected in 1982, and even being a former Marine, I have to concede there is no stronger advocate for veterans, women veterans, Vietnam veterans, veterans of all eras and conflicts, than Marcy Kaptur. Marcy, thank you for testifying today, and we will recognize you for as long as you need.

STATEMENT OF HON. MARCY KAPTUR, A REPRESENTATIVE IN CONGRESS FROM THE STATE OF OHIO

Miss KAPTUR. Thank you very much, Mr. Chairman. I commend you for holding these hearings this morning and for having such an excellent turn out on a bipartisan basis. I have to say I'm very impressed to see the chairman of the full committee as well as Congressman Edwards and Mr. Stump here this morning.

I want to thank Mr. Johnson and Mr. Davis for their comments. I have to say to my friend, Don Edwards from California, I was very disheartened to hear those statements. I used to have a great respect for the Navy, and for the Secretary to make some of those statements is just very disheartening.

I know when we took the full committee a few years ago and the Subcommittee on Hospitals and Health Care out to California, we were flown around the San Francisco area by a unit from the Marine Corps and the chief mechanic on the helicopter with us was a Captain, a woman. She did a fantastic job. I could never do her job but I was very proud of her. We landed safely. We had a wonderful trip. We learned a lot. I got a sense at that time of the important role of women in the Armed Forces of this country.

For a Secretary of the Navy to say that, I think I am going to write him a little letter.

I also want to commend this committee for being receptive to the needs of women veterans. I suppose in terms of percentages, they equal our percentages of women here in the Congress. I have to say that we have been received very well here and I hope that the Armed Forces would continue to enlarge opportunities for women.

I think women constitute a group of veterans who all too often have been forgotten in the development of veterans' programs and policies. Two years ago, the Veterans' Administration placed the number of women veterans at an estimated 1.2 million or 4.1 percent of the total veteran population of over 28 million. Since coming to Congress, I have become familiar with the many difficulties these veterans have experienced in dealing with the Veterans' Administration and the programs intended to assist them. Quite frankly, I have always been surprised in our visits to veterans' hospitals and clinics and to nursing homes over the few number of women I ever meet, and I don't mean employees, I mean people who are using the services of those hospitals. I know there are still many women that do not feel welcome.

According to a VA survey of women veterans, the benefit programs most widely used by them have been the GI Bill, the Guaranteed Home Loan Program and the Life Insurance Program. At the same time, a high percentage of these women were unaware of the availability of or their eligibility for readjustment and other psychological counseling programs and thus their utilization of these benefit programs was lower.

While 1 out of 10 women veterans has been a patient in a VA hospital, 17 percent of service-connected women veterans and 25 percent of those receiving veterans' pensions believe that they were not eligible for such care.

I hope that your hearing today will shed some light on why women veterans do not take advantage of veterans' benefit programs and how the system can be made more accessible to them.

I have a hunch from the people that I meet, the women that I meet that are taking advantage of the new GI Bill, that we are going to see more women moving into the Armed Forces. I think it's an area that is certainly worthy of your attention.

Another matter that I know is of strong and continuing interest to women Vietnam veterans is the issue of their exposure to Agent Orange and the long drawn out battle with the Veterans' Administration in having them included in the Center for Disease Control's epidemiological studies of Vietnam veterans and their exposure to such defoliants.

Your support was crucial to the enactment of legislation in the 99th Congress to require the VA to provide for a study on the health effects of the Vietnam experience on women veterans. Unfortunately, progress on the women's study has been hampered by controversy surrounding the original Vietnam veterans' Agent Orange study design.

Perhaps, Mr. Chairman, you and the other members of this distinguished subcommittee, as well as the witnesses here today, can impress upon the VA the urgency of the situation and the need to proceed with these studies to alleviate the anxieties under which so many Vietnam veterans, men and women, continue to live.

Finally, I just wanted to reaffirm my support for the erection of a memorial to women veterans. I was extremely pleased when this monument was approved in the last Congress and I look forward to its dedication. Since World War I, over 2 million women have served and fought in the defense of this Nation and it is high time they received the attention, recognition and accolades they so richly deserve.

Thank you very much.

[The prepared statement of Congresswoman Kaptur appears at p. 84.]

Mr. EVANS. I thank you, Marcy. Thank you for an excellent statement. We appreciate your coming today.

I want to point out one concern that Major General Holm is going to testify about because I would like your comments. It concerns the problems women veterans have had and relates to the historical reluctance on the part of women who served in the Armed Forces to claim their veteran status.

This was partly because, General Holm says, until recently, military service for women was not accorded the same public approval routinely accorded to men who had served their country. Don Edwards has indicated that still continues somewhat at least in the Navy. Partly this is because of the negative attitudes on the part of VA personnel that they may have encountered.

I am going to ask your help in the future to maintain a focus on this issue. You have been a leader on it in the past. Do you have any comments about what we might do to try to turn the image problem around within the VA, within the military?

Miss KAPTUR. It's rather interesting. I went out to Bethesda recently for my regular check-up. They have a full service hospital there and I asked the doctor if there were any needs that he didn't feel were satisfied. He said that about 40 percent of the hospital's patients are now women, nearly half, and even if one looks at the types of services that they have, such as gynecological services, he has trouble getting staffing. Even the way in which they are structured as a hospital to serve their patient load isn't quite what you would anticipate in the private sector. They would probably have different types of staffing.

I think it is a problem that we don't always look at who we are really serving. These VA institutions have grown up with us and we haven't changed them to reflect who is really using them. I would say take a look at who the clients are and, hopefully through hearings like this one, we will begin to focus more attention on them.

I was very surprised at that comment at a very distinguished institution like Bethesda Hospital and the fact that even there, they felt there wasn't enough attention paid to the women that were coming in and using that particular hospital.

In the VA, I think for many years the women just didn't feel welcome. I think it was in Pittsburgh, when the committee visited a VA hospital there, they had set up a separate wing. I think that was the only place I really saw very many women using a medical facility.

I know in my own district at our outpatient clinic, rarely do I see a woman in there for a visit, to use the facilities.

I think that (a) they sometimes don't know about these services and (b), even when they do, they feel it isn't for them.

I want to thank you very much for your attention to this important matter, Mr. Chairman and members of the Subcommittee.

Mr. EVANS. We have to turn that around. I have had the same experience when I have been in VA facilities throughout the country, including the facilities that serve my district. I have seen very few, if any, women on the trips we have taken together. I look forward to working with you in the future.

Miss KAPTUR. One of the things we can do is publicize the work of women veterans. I believe that at one of our full committee meetings, Sarah McClendon mentioned she had been a paratrooper.

Mr. EVANS. She is right here with us.

Miss KAPTUR. If you weren't a paratrooper, what were you, Sarah?

Ms. MCCLENDON. I was a public affairs officer.

Miss KAPTUR. We should put her on Night Line. Maybe what we should do is put her on one of these talk shows and move her around the country because I think she is an excellent advocate for women veterans.

Mr. EVANS. So do I. We should have her stand up and be recognized.

[Applause.]

Mr. EVANS. The gentleman from Arizona.

Mr. STUMP. Thank you, Mr. Chairman.

Marcy, thank you for a very fine statement and for taking the time to be here. I have no questions.

Miss KAPTUR. Thank you for listening.

Mr. EVANS. Mr. Chairman?

Mr. MONTGOMERY. Thank you, Mr. Chairman. I would point out to our women veterans that Marcy Kaptur is chairman of a Subcommittee of the Veterans' Affairs Committee, and one of the first women that I can recall that has been a chairman of a Subcommittee on Veterans' Affairs. She is very active and we are very proud of Marcy.

Sarah McClendon is also a member of this Advisory Committee and has been very, very active and has worked very hard in bringing forth women's problems in dealing with the Veterans' Administration.

Thank you.

Mr. EVANS. Marcy, thank you again for coming today and joining us.

Miss Kaptur. Thank you, Mr. Chairman.

Mr. Evans. At this time we would like to call forward Maj. Gen. Jeanne Holm and accompanying her is Colonel Rossi. We are very pleased to have them before us. We want to briefly recognize the importance of the continuing of contributions which are being made by the Advisory Committee. The committee has issued two formal reports in 1984 and 1986. They contain more than 80 specific recommendations on subjects of concern and importance to women veterans. This is an impressive accomplishment. Current and former members of the Advisory Committee should be proud of the work they have done.

I would like to briefly give background information on both of the women who are going to testify next. Chairman Holm has had a most distinguished career. She enlisted in the Women's Army Auxiliary Corp in July, 1942 and retired in 1975 after nearly 33 years of active service. In 1971, she became the first Air Force woman to be promoted to Brigadier General. In 1973, she was promoted to Major General, becoming the first woman in the U.S. Armed Forces to serve in that grade. She has received the Legion of Merit and has twice been awarded the Distinguished Service Medal.

Accompanying her is Col. Lorraine Rossi, who is a Vietnam veteran and retired Army Colonel. She served as an advisor to the Vietnamese Women's Armed Forces Corp from 1968 to 1970.

We again appreciate you coming before us today, your work on the Advisory Committee, and your service to this country. We will give you as much time as you need this morning and then we will follow that up with questions.

Major General Holm.

STATEMENT OF MAJ. GEN. JEANNE HOLM, USAF (RET.), CHAIRMAN, VA ADVISORY COMMITTEE ON WOMEN VETERANS, ACCOMPANIED BY COL. LORRAINE A. ROSSI, USA (RET.), PAST CHAIRMAN

General Holm. Thank you, Mr. Chairman, members of the subcommittee. I welcome this opportunity to testify on the current status and concerns of women veterans.

Women veterans are grateful for the continued interest of this committee on how well the Veterans' Administration and other Federal agencies are meeting their obligations to provide services and benefits to the women who have served in the Armed Forces.

My comments will be based on the findings of the Advisory Committee on Women Veterans, my own observations and on the research that I have done on women in the military.

The Advisory Committee on Women Veterans was created in 1983 in response to a need. Although the laws that provide benefits to those who have served in the Nation's Armed Forces apply equally to male and female veterans, the reality has fallen short of the objective.

I think the depth of the problem can best be illustrated by the fact that until the 1980 census, the number of women veterans could only be guessed at, because apparently it was not considered a matter of sufficient import. It was a strange omission when one considers that women have been serving in the U.S. Armed Forces since the establishment of the Army and Navy Nurse Corps at the turn of the century. Over 13,000 women served in the enlisted ranks in World War I. During World War II, more than 300,000 women served as officers and enlisted personnel; 17,000 of whom served in combat theatres. Many earned combat decorations. Some were prisoners of war and some remain buried in U.S. cemeteries overseas.

Since 1948, they have made an indispensable contribution to the Nation's defense as members of the career regular and reserve forces. In the past 15 years, women have been a significant factor in the success of the All Volunteer force.

Today, there are over 220,000 women in the Armed Forces representing over 10 percent of the force and their numbers are projected to continue to increase in the coming years, while the total force remains relatively constant.

Moreover, women are now so totally integrated into the Armed Forces all over the world, that we could not go to war without them. Even though technically they are barred by law or Service policies from most combat positions as well as certain combat units, combat aircraft and combat ships, they will otherwise be subject to the risks inherent in military service. Thousands are serving overseas, aboard ships and in military aircraft where they could become casualties in the event of a conflict. It is a recognized fact of military service shared by all.

Despite the long history and growing presence of women in the ranks of the military, serious interest in women as veterans did not surface until after the results of the 1980 census were known. It was then discovered that there were 1,158,900 living women veterans representing 4.1 percent of the veteran population. Today, they constitute the fastest growing segment of the veterans population.

In 1982, in response to the request from Senator Daniel Inouye, the General Accounting Office conducted an investigation of the Veterans' Administration's treatment of women veterans. The GAO found what most women who had served in the Armed Forces already knew; that women had long been generally ignored and short changed by the very Federal agency whose mission it was to serve all of America's veterans.

I will not read the portion on the GAO report since you already have that.

In April, 1983, in response to rising criticism of the VA's treatment of women, the then newly appointed Administrator of Veterans' Affairs, Harry N. Walters, established the Advisory Committee on Women Veterans. Initially, it was intended to be an internal VA advisory group but following the first meeting, which was held in September, 1983, the committee was mandated by the Congress.

The committee members are veterans, current members of the Armed Forces and/or individuals actively involved in veterans' affairs. They bring first hand knowledge of most of the issues and problems of women veterans, in addition to participating in the meetings twice a year, members on their own and at their own expense, visit VA activities in the field, participate in outreach programs and interact with women veterans.

The Advisory Committee has published two reports, the first dated July, 1984 and the second July 1986, copies of which have been made available to this subcommittee. The next report is due next year. Our reports accurately reflect the findings of the Advisory Committee. We believe that most, if not all, of the issues and concerns of women veterans have been identified and are being addressed with varying degrees of success by the agencies responsible for veterans programs.

I shall not attempt today to cover all of the issues, but will highlight a few of the more significant ones, and briefly discuss some of the efforts taken to resolve them.

It's not the objective of the Advisory Committee to obtain special or preferred treatment of women veterans, but to ensure that all veterans, regardless of gender, receive the benefits to which each is entitled under the laws and policies administered by the Veterans' Administration.

Now, this is not as easy as it might seem. While the laws apply equally to male and female veterans, their needs are not always identical. Also, the demographics of the male/female veteran populations differ in significant respect that impact on VA services.

In the beginning we found that the VA had very little data on women that might serve as a basis for determining their needs, for evaluating the effectiveness of services, and for future planning. Extensive data have since been collected. VA reports have been expanded where necessary, to break out information on the female population, and studies have been conducted in specific areas.

Also, additional data have been collected through a separate survey of female veterans conducted in 1985 under contract with Louis Harris and Associates. These data reveal some striking differences between the male and female populations; differences that must be taken into account in future VA planning. Probably the most striking observation is that women constitute a growing segment of the veteran population, while the male population is declining as deaths surpass new male accessions into the veteran ranks. These trends directly reflect the dramatic changes that have taken place in the male/female mix of the all volunteer force.

Another important difference is that the male population shows pronounced peaks reflecting wartime build ups for World War II, Korea, and Vietnam, and a pronounced decline in young veterans since the advent of the AVF.

The female demographics reveal quite a different picture with a large portion of World War II veterans, and a large and rapidly expanding population of post-Vietnam women veterans. This means that, compared to the overall veteran population, the female population is disproportionately elderly and very young. The kinds of demands these two groups make on VA services and benefits, particularly in health care, are vastly different.

One of the most pressing problems pointed out by the GAO was that women veterans were not adequately informed of their benefits. This problem had deep roots in the traditional mindset of the VA that it existed chiefly to service male veterans. Most VA publications, studies and attitudes projected this bias.

Also, there has been historical reluctance on the part of women who serve in the Armed Forces to proclaim their veteran status.

This was partly because until recently military service for the women was not accorded the same public approval routinely accorded to men who served their country in the Armed Forces. And partly because of the negative attitudes on the part of VA personnel they may have encountered.

Moreover, women usually found that VA medical facilities were not equipped to provide for them. Thus, reenforcing their own feelings of not being full-fledged veterans in their own right.

The challenge of the VA has been to turn this situation around by reeducating and sensitizing the organization, and by a comprehensive outreach program to women veterans informing them of their rights, and encouraging them to use their entitlements. The response to this dual challenge has been straightforward and aggressive.

Women Veterans Recognition Weeks have been proclaimed by the President. Public service announcements, posters, displays, and media events have been used to publicize the theme that "Women Are Veterans Too." Women are featured in VA publications and all official directives have been reviewed, and where appropriate, revised to include references to women. A new brochure designed specifically for women veterans has been published and distributed.

VA hospitals are conducting local outreach programs where women veterans are invited to participate in day long programs covering eligibility, health care and other benefits for women veterans.

Members of the Advisory Committee have participated in these programs, and report that many of the women who have attended have never considered using VA services. They had considered VA hospitals as a place for male veterans with no facilities or interest in women. Most were pleasantly surprised at the reception they received.

The national veterans organizations have contributed enormously by lending their support to forming the Advisory Committee, for identifying problems, and by actively reaching out to women veterans. They are providing assistance to women in need and conducting training programs within their organizations on women veterans issues.

They have publicized and distributed informational materials, and in general, sensitized their memberships to the fact that "women are veterans too."

The Non-Commissioned Officers Association and the American Legion have produced and distributed "Women Are Veterans Too" bumper stickers. The veterans organizations are also providing valuable VA watch-dog services. For example, the American Legion in their VA medical center and clinic site visit reports include information on the quality and timely care of women veterans. The AMVETS in their annual training for VA hospital volunteers include a seminar on hospitalized women veterans' special needs. The Disabled Veterans of America has actively encouraged women veterans to become involved in the National Veterans Service Officer Program, and to our knowledge, currently employs more women veterans in this capacity than any other national organization.

The women veterans organizations such as the WAC vets, the WASPS, the Women Marines and Navy Women have all been active in informing their membership of their entitlements.

In the crucial area of health care, the Advisory Committee is especially pleased with the rapid strides made by the VA. All hospitals, nursing home care units, and outpatient clinics now serve women. Now, the level of care varies from minimal to full services, but it is improving across the board. However, of the 16 domiciliaries, I was going to say 9 currently accept women, as of the day before yesterday I find that 14 now service women veterans, and they expect to open a 15th in June of this year.

Today, VA directives mandate that a complete physical examination must include breast and pelvic examinations. Female veterans must be able to receive ambulatory care for gender-related ailments. Each VA medical facility must provide outpatient GYN services by at least one mechanism in addition to fee-based care.

Improvements in services to women veterans has been reflected in a noticeable drop in the numbers of complaints. One reason for this drop may be due to the presence of women veteran coordinators.

At the Advisory Committee's recommendation, the medical director at each medical facility has appointed a coordinator for women veterans to act as a liaison to ensure proper care and treatment for women patients.

The Department of Veterans Benefits, on its own initiative, has also appointed women veterans coordinators in its regional offices.

Although significant progress is being made, health care remains the most important ongoing concern of the Advisory Committee. The inability to fully accommodate to the privacy needs of the women has still not been fully resolved. Although there have been considerable improvements, it still presents problems.

The Advisory Committee is concerned that budget constraints and competing priorities not foreclose on what needs to be done.

The Minnesota VA Medical Center has designed a mammography test unit to aid the detection of breast cancer. We feel that this program should be given support in the future.

In the area of health care the impact of the aging women veterans looms large in the future. It is estimated that one in five female veterans is at least 65 years of age as compared to only 14 percent of the male veterans. The cohort of women age 75 and over is projected to grow unabated until the turn of the century when there will be some 260,000 women in this oldest age group. These women are less likely than the men to have family support systems, living spouses, and children to assist in their care. They are less likely to have had any full-time employment since they left the military. But if they have been employed, their incomes on an average will have been substantially lower than for the male veteran.

All of this translates into future demands on VA health care facilities, especially nursing home care, domiciliaries and treatment for diseases that afflict elderly women, notably osteoporosis and Alzheimer's disease.

Service in South Vietnam presents a different set of concerns. There are no accurate data on the exact number of women who served in South Vietnam during the American involvement there.

My own research indicates that roughly 7500 were assigned in the area of Vietnam, Thailand, and off-shore on the hospital ships. Many of them returned with combat decorations. Some with wounds inflicted by the enemy; others with psychological wounds inflicted by dealing firsthand with the horrors wrought by modern warfare. Eight are listed in the Vietnam Memorial here in our Nation's Capitol. By far, the largest number who served in Vietnam itself were Army nurses.

Concerns about the health problems stemming from duty in Vietnam such as exposure to Agent Orange and Post Traumatic Stress Disorder are essentially the same for male and female veterans.

The Advisory Committee found that women veterans had been routinely excluded from studies conducted by the VA, the Centers for Disease Control, and other agencies. We also found a general lack of awareness or concern about the effects on women of their experiences in the combat theater.

We believe that the VA should address the war experience of women who served in Vietnam, specifically the physical and psychological effects of Agent Orange and Post Traumatic Stress Disorder. We are pleased that the National Veterans Readjustment Study includes women. We strongly supported the Consolidated Omnibus Budget Reconciliation Act that mandated a study of women Vietnam veterans. It's our understanding that the protocol is being developed and that the study should be underway next year.

Perhaps the most important need of most men and women leaving active duty is for assistance in finding employment. The Harris Survey reported that although half of all women veterans are currently employed, either full or part-time, nearly 1 in 10 report that they are unemployed but looking for work.

The survey shows that unemployment or under-employment are significant problems for young women veterans. The reported rate for unemployment for women veterans, age 18 to 24, is 27 percent; for the 25 to 34 age group it is 11 percent. The Bureau of Labor Statistics of the Department of Labor began collecting employment data on women veterans in 1986. However, it will be years before the data base is large enough to be reliable. Until more information is available, there is simply no way of determining the employment status and unique needs of women veterans.

The VA and the Department of Labor are working together to promote employment of women veterans. The agreement between these two agencies specifies that the VA and Women's Bureau will consult and coordinate to identify issues of concern to female veterans and develop strategies to address these needs. We hope to see this degree of cooperation extended all the way down to the State and local levels.

The Veterans Job Training Act of 1983 was intended to provide permanent employment for Vietnam-era and Korean War veterans, and certain disabled veterans who have been unemployed for long periods of time. The program has helped many veterans reenter the job market. So far, the data collected on this program indicate that only one percent of women veterans have availed themselves of this opportunity for job assistance, and we don't know why. Part of the reason may be traced to the fact that women leaving the service are generally better educated and have skills that make them more readily employable in the job market. Also, fewer women than men leave the service with service connected disabilities. I suspect that the real reason is that they are not as aware of this program as they should be. This is a problem that the VA, in concert with the Veterans Employment and Training Service at the DOL will have to address.

Additionally, in order to receive maximum benefits from the Veterans Job Training Act programs, the population of veterans eligible to train under the law must be expanded to include all honorably discharged veterans. The increased number of women who are serving or have served since the end of the Vietnam-era make the program expansion a must, if we are to fully utilize the skills and training of today's women veterans.

The Advisory Committee is impressed with the level of cooperation that exists between the various federal agencies in the area of veterans employment. We believe, however, the efforts to improve women's employment will be enhanced by having a woman veterans advocate accompany the VA representative at all meetings of the Labor Department's Advisory Committee on Veterans Employment.

We have also recommended that a joint VA, DOL, DOD, and OPM study group be established to discuss strategies to encourage the participation of women veterans in federal employment. The VA has reacted positively to these proposals.

The Advisory Committee have no desire to take credit for the actions that have been taken to improve the delivery of services to the woman veteran. Our role has been that of a catalyst within the VA, and with other federal agencies. We believe that the major issues and problems have been identified; we're satisfied that the agencies responsible are responding to what needs to be done to ensure that the woman veteran receives the benefits to which she is entitled under the law. We're especially gratified with the positive response of the VA at all levels of the organization. That is not to say that all of the problems have been resolved; obviously, they have not. But under the leadership of Administrator Thomas Turnage, and with the continued interest of the Congressional Oversight Committees, we remain optimistic about the future.

I can assure you that the Advisory Committee will continue to call the shots as we see them, and will not be satisfied until women veterans receive equitable treatment.

We thank you for your interest and for your support of all of America's veterans.

That concludes my remarks. I shall be pleased to respond to your questions, Mr. Chairman.

[The prepared statement of General Holm appears at p. 86.]

Mr. EVANS. Thank you. That was an excellent statement. I don't know whether you want to take credit or not. You deserve it for all the work that you've done with the Advisory Committee. If we had one witness today, we would have been very well served just by hearing your statement. It was an excellent summary of the issues.

I found it very interesting when you talked about women veterans are less likely than men to have family support systems, living spouses and children, to assist in their health care. Do those same kinds of problems also complicate things for women veterans in terms of their employment opportunities and getting into small businesses? In effect women veterans have the same problems as male veterans do when they get out of the Armed Forces in terms of maybe catching up with the lost income due to their service to this country, but isn't that compounded for women veterans because of the social and economic and other societal barriers that women face generally in society. Is that a problem that you see?

General HOLM. Yes, that is an accurate reflection of what really happens. The overall problems of women in employment affect all women, whether they are veterans or not. I do think that the woman veteran, however, does have a leg up, in that she's had marvelous training in the Armed Forces. You know, the Armed Forces are running the largest trade schools the world has ever known, and more and more women are taking advantage of that. I think that you will see that the average woman who comes out of the military probably is better prepared for civilian employment than her civilian counterpart.

However, she does have the added problem in that she is more apt to be a single parent than a male leaving the service, and she has a harder time taking care of children than generally the male veteran has, and that does present a problem.

What I had reference to there in my statement had to do with the older woman veteran. As you know, women live longer than men in this country, by about 7 years. Also, men tend to marry younger women while women tend to marry men older than they. Men tend to remarry more than women do. More of the women who come out of the military are single and have never married, than men who come out of the military. So that in general I think that that is the cause for a much higher rate of women without spouses with whom they live in later years.

It also accounts for the fact that fewer of them in general have children, because of the larger number who have never married. So that I think we are going to find in the out years that we will have a much larger demand on the part of older women veterans on VA facilities, because they will be poorer and because they don't have families to help them.

Mr. EVANS. Well, that's of great interest to this committee, as are your observations about the growing numbers of elderly women veterans and younger women veterans, and that's something that we will be passing along to some of the other subcommittees. It will be of interest and we want to make sure that those kinds of factors are considered.

You have talked about many of the recommendations of the Advisory Committee that have been implemented. Could you tell us of any disappointments you've had in terms of any recommendations so perhaps we could push a little harder with the VA?

General HOLM. I can't say that I've had disappointments. No agency ever lives up to my expectations, including the Department of Defense, I might add. We will not be satisfied until all these issues are resolved. I think the thing that we have to be concerned about for the future, really, is stick-to-it-ness, to be sure that we do what we say we're going to do and what we plan to do. And funding could be a problem; if the VA doesn't have the funds to produce some of the changes that are necessary, even though they're not large changes. Also the possibility of funding priority conflicts at the local level are always there and can present problems.

Nevertheless, I could not have believed, having been involved in bureaucracies all of my life, I could not have believed that an organization could turn around as the VA has turned around on this women's issue. There's a long, long way to go, but the problem now is going to be keeping the momentum going, to avoid falling back into old habits. Because there are a lot of people who just wish this female problem would go away. That's true in the military as well as in the Veterans' Administration.

Mr. EVANS. Colonel Rossi, would you like to comment on that?

Colonel ROSSI. Thank you, Mr. Chairman. All I can do is agree with General Holm, that the VA responded in a manner that none of us expected it would. If we thought we would have a fight on our hands, we didn't have a fight. We have been able to work with them very closely, and I think that has been the reason for the successes that have been enjoyed, because they were responsive to the recommendations and looked to the committee for recommendations.

I might add that the Veterans' Service Organizations have been a great help, because they have picked up on it, and some of them who themselves were probably less than responsive in past years in welcoming women veterans into their groups, have done a turnaround. They have recognized that women are part of the active forces, therefore they're part of the veteran forces, and they have welcomed them—not into the auxiliary, but into the main veterans' stream. They have included them in all of their site visits questions and included in their reports follow-up. So I would say the concerted effort of all of the groups has been supportive and as long as we can keep that and the interest of all the people going, and again not to make it a special program, but what is due to women veterans.

General HOLM. I'd like to add to that, too, that I don't think that this subcommittee taking this issue up today could have been better timed, because of the tendency of any issue to begin to get buried in everything that goes on in Washington. And I think that it could not be more timely to keep the momentum going on the issues.

Mr. EVANS. Thank you. We are going to continue whatever oversight we need and just let me know if you don't think it's getting the attention it deserves. We want to keep the momentum going, as we discussed earlier.

Very briefly, you talked about budgetary problems. We have had some problems, but bipartisan consensus on this committee is that we are trying to provide a current level of services within the Veterans' Administration. We may be faced in the future and later years with budget cuts coming in the VA. Would you see the possibility of budget cuts, particularly let's say in the medical department of the VA, having an undue impact on services to women veterans, given the fact that we are just trying to maintain what we have now, and perhaps some of the improvements you are talking about might require more money or diversion of some of our funding that we presently have? Would you think that that might have an adverse impact on your goals?

General HOLM. It could have. However, because of the way the construction has been going and the progress the VA has made in its own recognition that what women want is not very different from what men want, like privacy. The new construction that's been going on in the VA for a long time now, all the new buildings that go in now include the kinds of things that will take care of the privacy needs of women as well as men. The large open bay dormitory type hospital facilities have almost disappeared.

This was particularly true of domiciliaries that I have seen. Some of the domiciliaries are old World War II barracks, open bay barracks. There is no way you could put women in those, particularly because of the numbers. They're just not adequate. Those kinds of things, I think, are being phased out so rapidly that I would hope that a few years from now that any budget cuts will affect women and men equally.

Mr. EVANS. I have plenty of other questions, but I'd better use discretion in my first hearing, and I yield to the gentleman from Arizona.

Mr. STUMP. Thank you, Mr. Chairman.

General Holm, I congratulate you on your forthright statement, after one of the most distinguished military careers of any woman in our country's military history. You have an authority probably unmatched by any other woman.

I'd like to ask you a question: If you had to single out the area concerning women veterans most needing attention by the VA, what would that be?

General HOLM. Apart from the general problem of outreach, it has to be medical. That's the one we have to keep after to be sure that we provide full services as much as possible to women veterans. As I mentioned in my statement, some places we have complete services for women veterans. It's usually where there are large numbers. Others, the services are minimal. I think the continued emphasis in that area is going to be the number one problem, sir.

Would you like to add to that, Colonel Rossi?

Colonel ROSSI. Many medical centers and clinics where they don't have many women, have managed to outreach and bring them in and hold a clinic day and have consolidated their services, and are sharing a great deal. Dr. Gronvall will probably be able to enlarge on this when he appears later, but I agree that to make sure that the women are not turned away when they are eligible is the key issue.

Mr. STUMP. Thank you. I was about to ask you the same question.

While I'm at it, let me congratulate you for the very good job you did as past chairman of the VA Advisory Committee on Women Veterans.

Mr. Chairman, I apologize to you and the rest of the witnesses and the members of this committee, I have a mark-up in our Research Development Subcommittee, a final mark-up that I simply cannot miss. I would like to ask permission for counsel and myself to submit some written questions to some of the other witnesses, if I may, for the record.

Mr. EVANS. Without objection, so ordered.

[See "written committee questions and their response" on p. 152.]

I understand the gentleman from Illinois is in the same boat; is that correct?

Mr. DAVIS. Yes.

Mr. EVANS. We will go out of order to recognize you, if there is no objection.

Mr. DAVIS. I really have no questions. I thank you, Mr. Chairman, for that courtesy you have extended to me. I also have to leave. I was very impressed with this brace of witnesses. You are obviously very knowledgeable on your subject. You are very good advocates, both of you, the past chairman, Colonel Rossi, and certainly General Holm.

Maybe I do want to ask General Holm one question that relates to active duty women, of course, which ultimately relates to women veterans.

If you had your druthers, would you remove the remaining prohibitions against combat roles for women?

General HOLM. Well, I would remove the legal restrictions, yes, sir. Because I believe that the Secretaries of the Services, even though I might not agree with some of the Secretaries once in a while, I do believe the Secretaries of the Services should not be bound by legal restrictions that they may not be able to live with in the event of war. I believe that the Service Secretaries ought to have the prerogatives to make the decisions subject to the consultation with the Congress.

Mr. DAVIS. I am curious, and again I was asked to query by a fellow member who had heard that some 70 percent of the tactical intelligence officers at the company level in the Third Armored Division were women. He was curious as to why so many, and I told him that answer was very simple, because they are a a lot smarter than the men, but the second question he had was what would happen in the event that Ivan came across the wire. And he wanted me to pose that question to General Griffin, who is commanding the Third Armored, and I did. And General Griffin said they'd move forward with their company, the same way as everybody else.

General HOLM. That's right. There's a common misconception that there is a general law that prohibits all women from participating in any form of combat. As you probably know, it only really applies to the Navy combat ships and to the Navy and Air Force's combat aircraft. But that has been used as the pattern or, shall we say, the will of the Congress to preclude women from serving in other forms of combat. And indeed, when the law was written, it was not intended that women would be used in combat in the Army, for example. They couldn't put it into words, though, in terms of modern warfare, how you would prevent them from being in combat. But that was 1948. Things have changed a lot since 1948, and it just seems to me that we are living with a law that is no longer applicable.

Mr. DAVIS. I was just curious as to your comments. Thank you very much. You have been a very, very informative witness.

General Holm. Thank you.

Mr. Evans. The gentleman from Ohio.

Mr. Applegate. Thank you very much, Mr. Chairman.

General Holm and Colonel Rossi, I certainly thank you for being here, and I want to say, too, that that was one of the most complete encompassing statements that I have ever heard as a member of this committee from anyone, and it seems as you went along, I had questions pop into my mind, but before you got a paragraph or so ahead, you already answered them. The success of your advisory committee, I certainly commend you and Colonel Rossi for your leadership roles.

I would only say that women have come a long way in their deserved recognition, and while much has been done, there certainly are a lot of the problems left to be answered, and I think with the continued leadership that you all have shown, through the committee, and working with the Veterans' Administration and with our committee, I think we will get them all resolved. These things are not easy, as you know, but I congratulate you, and I thank you for being before the committee.

General Holm. Thank you.

Mr. Evans. We appreciate your time, Mr. Chairman. Mr. Applegate is chairman of our Compensation, Pension and Insurance Subcommittee. I think you probably see some of the implications for the programs within your jurisdiction, so we definitely appreciate you being here today.

The gentleman from California.

Mr. Dornan. Thank you, Mr. Chairman.

I, too, was most impressed with the testimony this morning. This is my first time at this particular committee. I am new to Veterans' Affairs.

I wanted to ask you both a question about the American Legion, of which I am a member, but first I have to follow up on the question of the gentleman from Illinois. I just read an article on the first female combat fighter pilot in any of the free world forces, and she is a lady in the Netherlands. I wonder if you could comment, General Holm, on combat positions that require high technical skill, such as a fighter pilot in an area where the war would be decided in a matter of days. Only possibly POW status would give anyone pause, not because of our side, but because of other potential enemy sides, and a woman might come under especially harsh treatment. Have you thought at all about jobs from platoon leader or company commander, up to a complex job in a combat area like fighter pilot? Certainly women can fly as well as men, or she wouldn't be there.

General Holm. That's correct. I fully agree with you. History shows that in World War II, the Russians used women not only as fighter pilots, but as bomber pilots, and were very, very successful. It's interesting that they don't any more.

I see no reason in the world why women should not be allowed to fly fighter aircraft, and most every woman pilot that I have talked to in the Army, Air Force and Navy have said that, too. They see no reason why women should not be allowed to fly anything there is to fly, provided they're qualified and properly trained.

I think that law is outdated. I think the service policies in that respect are outdated. I see no reason why women should not serve on combat ships of the Navy. The Navy plays a shell game as to which ships are classified as combat and which ones are classified as non-combat. It's like Humpty Dumpty who said, "When I use the word combat, it means what I want it to mean."

I think the whole issue has become too slippery and too complicated, more complicated than it needs to be. I do have problems possibly with women serving in the infantry because I don't think, first of all, that's the best place to be using women. But I think the services have themselves in kind of a vise, particularly the Army right now, with its definitions of what is a combat unit and what is a combat probability thing. They can't decide what they want to do. Are they trying to protect women from the horrors of war? If they're trying to do that, well, that horse already left the barn. Women have been exposed to the horrors of war in every war in our history.

If they're trying to see that women don't fire shots at enemies, I don't know what the problem is. I just don't understand the problem. As long as Service policies, though, restrict women from certain kinds of organizations, as the Army does today, in its combat probability code, it's created an enormous manpower nightmare. They have a matrix for using women in their organizations that's impossible to sort out. I think they have created for themselves a monster that's going to fall of its own weight.

Mr. DORNAN. A final thought on that. Were you on active duty during the Grenada liberation?

General HOLM. No, not Grenada. No, sir.

Mr. DORNAN. I went down there about 5 days after the initial assault. There were still snipers active on the northern part of the island, and there were all these women in the Army units.

General HOLM. That's right.

Mr. DORNAN. I asked some of them, and some of the young women told me that they thought it was bad for the morale of the men that the men had to take the brunt of the fighting, and then they had come in there—I think they'd been there 2 days when I was there, so they arrived on day 3 or 4. I turned to the commander and asked, "What are the ground rules here?" And he really didn't know. The women just arrived a little bit later.

Well, then, my question on the main focus of your appearance here today is on the American Legion. Are the women coming into the American Legion, and into the Veterans of Foreign Wars, in greater numbers? And are there outreach programs in these major veterans' organizations?

Colonel ROSSI. I think they are assisting in the outreach to the women veterans. I can't answer specifically whether the numbers have increased, but I suspect that more women are joining the organization itself rather than the auxiliaries.

I think a lot of the women who served in World War II joined the auxiliaries because their husbands were a member, say, of the American Legion or the VFW, and they joined the auxiliaries. I think you find more women now being encouraged to join, and the organizations themselves are much more receptive, but I'm sorry I don't have the answer to the specific numbers.

General HOLM. In fact, I understand that there are 100 American Legion Posts that are women's Posts, which is, I think, an interesting trend.

Colonel ROSSI. And more of them serving in national offices.

Mr. DORNAN. There are 100 Posts totally membered by women veterans. Have many women made their way up in the leadership ranks, the officer corp of the American Legion?

Colonel ROSSI. Yes, they have. In fact, Margaret Malone—

General HOLM. One of the members of the committee.

Colonel ROSSI [Continuing]. Members of our committee have served in that position.

Mr. DORNAN. Well, that's excellent. Thank you very much.

Thank you, Mr. Chairman.

Mr. EVANS. Thank you. We have other questions that we'll submit to you in writing and ask that you respond to them in writing. We want to thank you again for your time and efforts here today, as well as your ongoing efforts with the Advisory Committee. Please let us know, informally or formally how we can help. Thank you very much for coming today.

General HOLM. Thank you, Mr. Chairman and members of the committee.

Mr. EVANS. We call now our first panel. First, Julia Perez, Director of Veterans Affairs, University of Massachusetts at Boston. Julia is a veteran of the U.S. Army, having served in 1958 and 1959. If you would come forward Julia; Linda Schwartz, who is recently retired from the U.S. Air Force Nurse Corp after 16 years of military service. She is a member of the Governor of Connecticut's Task Force on Women Veterans, and the regional coordinator for the Vietnam Women's Memorial Project; and Jannette Tappan, the women veteran coordinator of the Commonwealth of Massachusetts, State Veteran Services.

If you will come forward now. We will incorporate your full statements in the record. If you will summarize your statements within 5 minutes we would appreciate it, so that we can expedite the hearing.

Julia, we'll start with you if you're ready.

STATEMENTS OF JULIA PEREZ, DIRECTOR OF VETERANS AFFAIRS, UNIVERSITY OF MASSACHUSETTS AT BOSTON; LINDA SCHWARTZ, RN, MSN, MAJ., USAF (RET.); AND, JANNETTE TAPPAN, WOMEN VETERAN COORDINATOR FOR THE COMMONWEALTH OF MASSACHUSETTS STATE VETERAN SERVICES

STATEMENT OF JULIA E. PEREZ

Ms. PEREZ. Thank you, Mr. Chairman and members of the Subcommittee on Oversight and Investigations, for allowing me to come and address you in this way.

My testimony is based on a study that I have been doing for the past year. It started with a conference that we had at the William Joiner Center for the Study of War and Social Consequences on trying to see what women veterans needed; where were women veterans? Because we were not seen, the Joiner Center was primarily serving male veterans.

The conference was an attempt to bring women veterans together and to address some of the issues that affected them as veterans. The topics included: sexism, health, VA benefits, post-traumatic stress disorder, minority women in the military and other related issues. The conference committee were all veterans, men and women.

We had about 100 people come. Among those people were women who had served Vietnam, but who were not in the service. I wanted to include them in this part of my testimony because of the Agent Orange issue. Because these women have had no other recourse, I would like to see them included in studies done by the VA.

The majority of these women who came to the conference had not previously met. It was interesting to note that these women, once they came together, were talking about having been tremendously disappointed by the services given to them by the VA and service organizations. Although there has been an effort made by the VA and other veterans organizations, those organizations are primarily male dominated and still see themselves as that way, and are not treating women veterans the way that they should.

Out of this conference came a video called, "The Invisible Force: Women in the Military", which explores the issues that women veterans have had. We have also been getting many requests for the video from women throughout the country. We started out with a list of the 100 women and we now have a mailing list about 300 women nationwide, who keep calling. We keep getting statements, essays, letters, poems. We have a nurse who sent us all her letters that she sent home when she was in Vietnam.

We have a group of 50 black women, some of whom served in 6888 Postal Unit in World War II, a segregated unit. Practically none of these women have used VA services due to the racist behaviors in VA medical facilities.

I would like to point out at this time that, as a woman of color, just this past year in the springtime I went to the VA facility in Boston on an official visit. Although I was dressed in my most professional manner, I was continuously being asked by staff there, as I went from floor to floor, for my routing slip. I was then put in an office where I overheard two medical personnel people plus one of the secretaries talking about how, quote, "The Ambassador from Japan was right about how the minorities were really bringing this country down."

Needless to say, I am entitled to respect, not only being a woman and a veteran, but also being a person of color. Something has to be done about racist behaviors and sexist behaviors at VA facilities.

I would like to point out that women veterans are seen in a very derogatory manner. Just recently I went to see Platoon, the most recent movie. The one reference to the nurse who was back there healing was the sexual act that she could perform on the wounded men. Not that she was a healer, but that she again was a sex object. Which takes me back to the woman in MASH who, again, was an excellent nurse. The character of Hot Lips Houlihan was a sex object and the one who could "service" some of the fellows there. So, that's some of the stereotypes that women veterans face. You are either one thing or another.

Many women veterans still feel that services at the VA facilities are poor. I talked to two women from Georgia who said that the VA facilities there were deplorable. In fact, one of the women had gone in for a physical examination and felt the doctor had no knowledge of how to treat her. She went in for a gynecological exam and he did a rectal exam first.

The VA facilities have a general overall poor reputation. Some of the outreach centers for the Vietnam veterans are in dangerous parts of towns. Again, VA centers are male oriented.

About the women veterans coordinator seen as a panacea: I've talked, since I sent in my testimony, to 15 women veterans coordinators. The women veterans coordinators are tremendously overworked. They are generally nurse practitioners who have a lot of other work to do. They either get 1 day, or a half a day for their coordinating responsibilities. This is not their overall job. They do not have money. They don't have time. They cannot have an overall effort; not to say that, it's not good to have them, but again, these women just don't have the time to provide to women veterans. I think that if there is going to be a VA coordinator in these facilities, it should be a full-time person who devotes herself to the issues affecting women veterans. She should also, if possible, be a veteran so that she can understand what some of our issues are.

Neither one of the women who I have gone to at the VA medical facility and at Court Street in the VA medical facility in Boston, are veterans. I had these women veteran coordinators come in and say, well, we're coming to you, what do you need? So, I in fact have been getting phone calls from VA coordinators asking me if I have lists of women to give them. I don't see them as any kind of panacea.

I think that the Veterans' Administration still has a strong lack of sensitivity around the issues of race; the issues of gender; the issues of culture. I think the sensitivity is strong around language. They still use strong sexist language, and I think that needs to be changed. Everything is for the man. "For he who served." What about her; where is she, we also served.

I tried to state the fact that I just think we're not getting enough. I think the time has come to stop all this baloney. All of this: "We're doing this, we're doing this, and we're pulling statistics", but there's a lot of women out there. I think we need a demographic analysis done of how many women. I think there are even more women than the study shows there are. And the only way to get to them is to do much, much more outreach.

Thank you.

[The prepared statement of Julia Perez appears at p. 98.]

Mr. Evans. Thank you, Ms. Perez.

Ms. Schwartz.

STATEMENT OF LINDA SCHWARTZ

Ms. Schwartz. Good morning, Mr. Chairman. I also want to thank you for this opportunity to address the committee.

I was going to limit my remarks and not include the statements from my testimony, but I think in view of some of the questions that have been asked this morning, I would like to share with the committee that Connecticut Governor William O'Neill appointed a task force to study the problems of women veterans in our State.

We did visit the VA hospitals and looked at the facilities. We also looked at the kinds of services that were being offered to women veterans. We were so impressed, and so was the General Assembly of Connecticut, at the lack of attention to the 16,000 women veterans in the State, that it is now written into the law that the State will have a coordinator for Women Veterans' Affairs within that Connecticut Department of Veterans' Affairs.

I would also share with the committee that in your search for information you should contact the Veterans' Affairs Committee of the State of New York, because they, too, held a hearing similar to yours.

And consistently throughout, we find that although the VA Advisory Committee on Women have made substantial and sound suggestions, these are not being taken care of at the lower levels.

So, when I hear General Holm I say, that's wonderful, that's great. However, it is not my experience, nor anyone that I have been in contact with, that this is the kind of service that women are getting.

I know that some administrators, and I can truthfully say that some of the coordinators of the VA hospitals, the women, are very well meaning women with no clout. I am cheered to know that they have had some VA recognition days for women, but I have no knowledge of these myself.

The specific issue I wish to address with this committee, and it was also a question that came from someone here this morning, is that I have consistently heard, even from women in the post-Vietnam era, a group of women who are suppose to be more enlightened because we are spending more attention on educating them about their VA benefits. But they had no idea of the importance of documentation of injuries, illness, and exposure to noxious substances and how that would later affect their applying for VA entitlements or assistance.

In my own case, when I was released from active duty in 1976, I did not receive a separation physical, although I had been in two accidents. I had no idea what my VA entitlements were; and it was probably the farthest thing from my mind. The clerk told me that if I ever got into a position that I couldn't pay for my health care, I could go to the VA for care. At that age of my life, I had no idea that later I would really need the VA. But I think the policies have changed considerably from the thinking of 1976; and the priorities of treatments within the VA system have changed because of the financial constraints.

I would also like to address the fact that most recently the injuries I received in a aircraft accident in 1983 illustrate the attitude that still prevails today. In 1983 while assigned as a Senior Flight Nurse aboard a U.S. Air Force Reserve training mission, our aircraft blew a hatch at 30,000 feet while were over the Atlantic Ocean, which caused a rapid decompression. I was able to function through the emergency, but the next day I did not know my telephone number, I did not know who the President was, I had no sensation on my left side, and I was in danger of losing my sight. I had decompression sickness of the central nervous system. And although, the Air Force initially provided me with decompression therapy, I was sent home. And because of the persistent pain, and the inability to see, I prevailed on the Air Force to give me some answers about what had happened to me.

After 6 weeks at the U.S. Air Force Hospital, here in Andrews Air Force Base, I was diagnosed as having—three doctors took me into a room and said, "You have organic brain syndrome and mild dementia. You can never go back to nursing. You can never go back to the Yale School of Nursing. You should go home and bake bread and thank God you have a husband to take care of you."

The official findings of the Physical Evaluation Board, Mr. Chairman, was that my injuries were due to a car accident I was in when I was 6 years old. The Air Force would not be responsible for my care.

After 16 years of military service, and attaining the rank of major, and being accepted into graduate school at Yale, my status was due to a car accident I had been in 33 years before? Can you imagine how disillusioning and outrageous that was for me. But it is doubly outrageous because I was too compromised to even defend myself at the time.

The attitude that women don't need the VA because they have husbands to take care of them is as prevalent today as it was when women were not accorded veterans status.

Women who have become seriously ill, injured in the line of duty, exposed to toxic materials or psychologically maimed during their military service are unable to obtain VA assistance because of inadequate documentation, lack of knowledge, or misinformation about the process.

My incident, Mr. Chairman, is not an isolated incident. I have heard this story over, and over, and over again. To begin with, it's extremely unfortunate to incur any disability. But it is doubly degrading to have to beg your Government to be responsible for your care. And most women don't have the wherewithall to negotiate that system.

Unfortunately, that does not alleviate their health problems or disabilities, nor should it negate this Government's responsibility.

The problems identified by the VA Advisory Committee on Women Veterans, and the 1984 Louis Harris Poll have not been adequately implemented to affect any changes or to improve any services for women veterans on the lower levels. I am happy to hear that it is happening some places.

The present efforts to outreach to women veterans has been so limited that it has become one of "America's best kept secrets." One has to wonder about an outreach program that has not made it out of Government channels to the public.

It is especially disheartened to learn that the Advisory Committee is working on problems of supplies of the VA canteens. There are greater needs when we see that the women veterans suffer twice the incidents of cancer compared to the general adult population.

There are the unanswered questions for women who served in Vietnam and were exposed to Agent Orange. The higher incidents of still-births, miscarriages, and children with birth defects demands our attention.

The Nation has a responsibility, all Vietnam veterans have a need to know, and their children have the right to know the real effects these poisons have on health. And the technology that has spawned that poison, and that tragedy can find the answers to these questions.

The last thing I would like to say is, it is extremely incredible to me to hear that the Congress once again entertains the idea of requiring nurses and other health care professionals to register with Selective Service for mobilization during a national emergency. Never in the history of this Nation has Congress had to coerce nurses to serve their country, despite the early inequities of not being accorded official or veteran status or compensation for their injuries. Nurses have endured the discrimination, omissions, and prejudices to serve the needs of this country.

The suggestion that this legislation is needed is insulting to every nurse who served or continues to serve this Nation. Congress would do better to invest its time and money to improve the quality of life, increase accessibility to veterans' services, and increase the recognition of those who do serve the military.

It is increasingly clear that the women of today will not tolerate the double standards we presently see with the VA system, nor will it attract them to military service. Printing posters for the walls of VA facilities, bumper stickers announcing "Women are Veterans, Too," and Advisory Committee reports that go unheeded are not going to reverse an 85-year-old trend of neglect, disregard and ingratitude

There are almost 1.2 million known women veterans who contributed their skills, energies, and talents to serve our country. Where would America be today if those women had stayed home?

This is not a mere question of money, cosmetics in a canteen, or services. Before us, sir, is a question of honor; how does a Nation honor, how does a State honor, how do individuals honor the contributions, the achievements, and the sacrifices of over 1.1 million of its citizens who are women veterans. These women did not do less; they did not love our country less; they do not deserve less. These questions need to be answered now, Mr. Chairman, not for the past, not for the present, but for all time.

Thank you.

[The prepared statement of Linda Schwartz appears at p. 102.]

Mr. EVANS. Thank you. Ms. Tappan.

STATEMENT OF JANNETTE TAPPAN

Ms. TAPPAN. Mr. Chairman and members of the subcommittee, I am pleased and privileged to be able to speak with you this morning and to identify as the Women Veterans' Coordinator for the Commonwealth of Massachusetts Veterans' Services.

My duties are to act as a link between the Commissioner of Veterans' Services and governors and Commissioner's Advisory Committee on Women Veterans, and to address the issues and concerns of women veterans in Massachusetts, which I have heard today, many of them, that have not been addressed.

This commission was established in 1985, and is comprised of 21 members appointed by Governor Dukakis and Commissioner John Hallachis, to identify and to locate women veterans in Massachusetts, and to advise and recommend to the Governor and the Commissioner of Veterans' Services policy by reviewing services and especially medical services, which may need improvement, to determine the adequacy of services now being rendered, and to make recommendations to meet these requirements.

We in Massachusetts think that there is a danger and a misunderstanding that veterans' benefits and services are solely designed for male veterans. We in Veterans' Services have discovered that even most male veterans are not fully aware of their benefits, let alone women veterans.

Today our priority and our efforts are directed towards reaching over 30,000 women veterans in Massachusetts, and that is not an easy task. Information on benefits and services to the veteran population is perhaps one of the most crucial requirements of Governmental agencies responsible for delivering these services.

What we in Veterans' Services of Massachusetts are doing to reach women veterans statewide is first to develop a master mailing list which will be used to disseminate information on an ongoing basis to keep women veterans constantly informed of their benefits and services provided by State and federal agencies.

In addition, plans are now underway to establish satellite centers for women veterans to create awareness and visibility, and to open up other avenues to communicate their special needs and concerns.

Governor Dukakis will declare Veterans' Day "Massachusetts Salutes Women Veterans," which is really a major event, and we are looking forward to it. We hope to create much more awareness than we have since 1985 and prior to that.

What we feel would be a team approach towards helping us reach our goals and that of the Veterans' Administration is to develop a yearly mailing to women veterans and inform them on a regular basis as to their benefits and services.

If all our efforts here in Massachusetts are combined with those of the Veterans' Administration, then we will all feel that we have done the best job we can in the interest of our veteran population.

However, in the process, the Federal Veterans' Administration must be the center of focus, and must take the initiative to bring the women veterans into our veterans' programs which they have earned along with their male counterparts.

And at this point in time I would like to conclude my testimony.

[The prepared statement of Jannette Tappan appears at p. 108.]

Mr. EVANS. Thank you very much. I want to thank you all for coming here today. I was just recently in Massachusetts and met with the Governor and John Hallachis at a State function recognizing the Medal of Honor winners from Vietnam. Massachusetts and Connecticut are very far ahead of the rest of the country in helping veterans generally, and we salute Governor Dukakis and Governor O'Neill for their work in that effort.

You all raised some very disturbing points, and I'd just like to make a comment as far as the veterans of this country are concerned, black, white, women or men. The Armed Forces were more than an equal opportunity employer during the Vietnam War. People of color serving in larger numbers proportionately than they were in the population as a whole. I would hope we would not have that lack of sensitivity to outright racism or sexism within an institution designed to help the veterans themselves.

Ms. Schwartz, as far as your individual case, I don't know if you have exhausted—

Ms. SCHWARTZ. I'm sorry. I would really want to clarify. It has been straightened. It took 3½ years but we finally got it straightened out last November.

Mr. EVANS. I guess that's kind of typical of the way maybe women have to fight just to get the minimum of benefits that maybe other disabled male veterans get in the standard course of business. These are things that I think again point out the need for active participation of women veterans within the whole process itself and that is really what we are here to do.

Ms. Perez, I want to also acknowledge the Center for sponsoring the first national conference on women veterans, for producing a video documentary on that conference.

You said you received many responses. Do you care to characterize any of the comments or requests you have received? In other words, what are some of the primary concerns you are hearing as a result of the conference?

Ms. PEREZ. It's interesting that the biggest thing that we hear is, we did not know of our benefits. I mean, there is a large amount of information that just has not been given out. We have just recently—I got a grant to do a whole study and documentary on black women veterans. I'm the only Hispanic woman veteran I know, but I'm trying to track some out.

The first thing that comes up is anger and rage at the inability to have voiced the feelings around being a veteran. This is not to say that the women had all negative experiences in the services. This has not been the case. But overall, women feel so invisible and so neglected that they have gone into the service because this is your country, you love it, you want to honor it, you want to do something for it and then you come out and you are a housewife or a mother or a secretary or single parent and no one asks women, "Were you in the service?"

Last week, I came across the first black female homeless veteran who is living in the streets. She is very eloquent. What is the Government doing for her? She's a mother and she is sleeping in the streets. Nothing is being done for her. Just as a matter of conversation she said, I was in the military for 5 years.

We have women—there was one woman who brought in her court martial. She served in the military 3 terms; the first 2 she had got honorable discharges; the last one she got a general discharge because someone accused her of lesbianism and they brought a court martial and she went on some sort of a drunken binge or whatever.

She had honorably served through two sets of duty and then the last one, it wasn't honorable any more.

Women come in and say, I just want recognition, I just want people to know about it. We have history departments. They talk about the war. They talk about veterans. They don't talk about women. Women studies departments don't have anything about women veterans.

We now have sent our video to five universities to be used in their women studies departments and history departments, on the issues of mental illnesses, psychology, women who have PTSD, that has not been addressed. There is really no ongoing group that settle in the issues of post traumatic stress disorder and it is really insulting to have women who served in Vietnam and come to the Vietnam Outreach Centers and they put them in with the wives. They don't have the same issues as the wives. Why bother coming? Why go to a group?

Lilly Adams, a Chinese woman who served in Vietnam goes up to receive an award, the assistant to the Governor says, boy, that dress really looks good on you, I love the way your breasts hang. Who wants to hear that kind of stuff?

I was the only woman in the Hispanic veterans group. One of the guys turned to me and said, I'm so glad you are here, I really wanted you to be here because we need a secretary. I'm not there to be a secretary.

It is the kind of attitude that men have about the women, the same kind of attitude the Outreach Centers have, the same kind of attitude the VA Medical facilities have and it has to change. Women are calling. I started out with about 85 to 100 women. I now have about 500 women across the country saying, we have to sit down, we have to talk, we have to deal with these things.

Mr. **Evans**. I just have to wonder out loud here. It is curious to me that on so many programs we are depending on States like Connecticut and Massachusetts. I think Massachusetts has its own private Agent Orange study. I hope women are included in the model of that study. In addition, I understand Massachusetts has, under Governor Dukakis' leadership, its own in-patient PTSD program.

It is disturbing to me that the States in effect are picking up what I consider to be Federal responsibilities. I don't want to take away from what you all are doing. We salute that. I am going to try to get the video you have sent me put on the House cable for re-broadcast so it can go to all the offices. But it is also disturbing that we have women veterans or Vietnam veterans that are depending upon State action. While that is great and very useful for the veterans of Connecticut or Massachusetts, it is not going to reach the veterans of Illinois or California. They may or may not have their own programs.

I see these as national responsibilities. We certainly need to ensure that in our vet center program, of which I'm quite proud. I would say the same kind of problems you are facing in terms of women veterans in Massachusetts are happening throughout the whole United States.

Ms. **Perez**. Let me add that is what I am saying. The calls that we are getting are not from Massachusetts. We are getting calls from Georgia, from California, from Washington State. We have women from Oregon. My supervisor went to a conference in Utah and I had some women calling in. He took some tapes. He came back with something like 12 hours of tapes of five women veterans who met with him to talk to him about the issues. We have a collection of histories now that would fill a whole dresser, just women who have agreed to talk into a tape and send us their stories.

One more thing Massachusetts is doing, Senator Kennedy's office said they would do a demographic analysis of women veterans.

Mr. Evans. That's excellent. I would hope Platoon isn't the first movie we are going to have of that kind. There are three million stories that need to be told including women veterans.

Ms. Tappan?

Ms. Tappan. Mr. Chairman, I am addressing this to my veteran friend, when she mentioned the homeless veteran. Are you aware that the State Veteran Services has over 13 assistance programs and one of the major programs today is the veteran homeless identification program? Commissioner Hallachis and his staff have worked diligently to investigate and to identify with veterans that are homeless in Massachusetts. They had sponsored, State Veteran Services sponsored a dinner at the Pine Street Inn in which they served over 300 people not knowing exactly what percentage of those people were veterans. Out of that came quite a high percentage of the homeless.

We have so many veteran assistance programs in Massachusetts, it is unbelievable. There must be a problem that we are not getting this message across. I have no particular reason or no answer to that as to why. We have 13 programs right here. The Commissioner made sure I had my fact sheet in front of me in case you wanted to know what they were. One of the highlights was the homeless veterans' program.

Mr. Evans. That is very interesting. Congresswoman Kaptur will be holding hearings on housing programs and the homeless veterans. Perhaps if you would supply her with some written statements, I am sure she would like to have those. Thank you for pointing that out.

Ms. Schwartz?

Ms. Schwartz. I wanted to comment on the idea of States and the VA system. When we were doing our research for the Women's Task Force in the State of Connecticut, we were able to identify there were 16,000 women veterans, because these were the women who had applied for a tax exemption on their property tax. When we talked with VA officials, the VA officials were not allowed to have access to those State names. It seems like the two systems are paralleling and if you really want to get down to what the citizens of this country wanted veterans to have in the services, you need to work together so that the VA could have access to the State and the State could have access to the VA, so you really could perform the outreach that you talk about, that we need for women veterans, and we definitely do.

Mr. Evans. Mr. Dornan has been very patient. Mr. Dornan?

Mr. Dornan. Thank you, Mr. Chairman. I can see that this committee has its work cut out for it. I have learned some things that I just had no way of believing as far as the way we have been so slow to honor our women veterans.

I went to Vietnam eight times, one of those times as a journalist and a combat photographer. I remember a trip in 1968, when I was there for over a month, I took a tour of field hospitals, those units closest to the fighting men. There were women at every station and every corps area, as close to combat as you could get, being mortared and rocketed at the bases. Their morale was if anything higher than the morale of some of the fighting men because they had to keep their morale up. I only heard one complaint in any of the trips, and that was from one badly wounded GI who asked me why the nurses had to spend so much time with the enemy. I went and asked. The women said, well, these North Vietnamese soldiers all have worms, and if they are raised in North Vietnam, they are no more immune to the malaria in the South than our soldiers. When they receive wounds, they are just in such bad physical shape that we have to give them more attention and our young men see us going back and forth into their rooms more often. The nurses even took care of the enemy. I have never been so inspired by people in uniform anywhere in the world. I think that feeling was shared by our men in all the units over there.

I remember vividly a group of young women that I visited with right near the DMZ who were taking the men and integrating them into their volleyball game and letting them play with the young dogs they had around their unit. I thought, boy, this is a picture that America does not see in our major newspapers or on the evening news, which brings me to one final thought.

I'm sorry, but I call "Platoon" "Spitoon." It spits on the honor of my father's service. He won three Purple Hearts. It tells nothing about these women that I saw, the tough old sergeants that I saw building orphanages. There is not one documented case of one combat sergeant ever murdering another combat sergeant in the line of duty.

When Oliver Stone went to work on his first screen plays, he admitted he was a coke head. I have no reason to believe him when he says he is cured or not. His films on drugs are disgusting. His film "Salvador" is an exercise in radical anti-American propaganda. This film "Platoon" will be used as a Communist training film. It is a disgrace. It is not a counterbalance to the silly combat films like "Rambo." Not many people will see "Hanoi Hilton" which opened this week, and which is an accurate and therefore somewhat boring truthful relation of the suffering that our men went through in prison, including nurses captured, many whom died by neglect going up the trail.

If "Spitoon" is to be the film of stature to reflect our Vietnam experience, that's a disgrace. It certainly isn't going to help your problems. I'm sure this committee will do its best to get this out.

I am going to lean on every veterans' organization I know to bring the women up front, including the auxiliaries, because those who wait also serve. The finest serving women I ever witnessed during the Vietnam war were the mothers and wives who just circumvented the Pentagon, this committee, the major Veterans' Affairs Committee, everybody, and took the lead around the world on demanding justice for their fighting men who were captives in Hanoi.

I learned to respect women as the best fighters during the Vietnam war on the home front and in every corps area in Vietnam, Laos and Cambodia.

Thank you.

Mr. EVANS. I have several other questions which I will submit by mail.

Mr. EVANS. Thank you again for your testimony here today. We look forward to working with you in the future. Thank you very much.

The next panel will be Veterans' Administration Officials, led by Dr. John Gronvall, Chief Medical Director of the Department of Medicine and Surgery. He will be accompanied by Dr. Susan Mather, Chief of the Pulmonary and Infectious Diseases Department of Medicine and Surgery, and Ms. Mary Leyland, Deputy Director, Vocational, Rehabilitation and Education Service, Department of Veterans' Benefits, and Mr. Ralph Ibson, Deputy Assistant General Counsel.

Doctor, you come forward. I have invited you to come out to Illinois to address some concerns of Illinois veterans and I hope we will be able to work out something where you will be able to join us in Illinois.

STATEMENTS OF JOHN A. GRONVALL, M.D., CHIEF MEDICAL DIRECTOR, DEPARTMENT OF MEDICINE AND SURGERY, VETERANS' ADMINISTRATION, ACCOMPANIED BY DR. SUSAN H. MATHER, CHIEF, PULMONARY AND INFECTIOUS DISEASES, DEPARTMENT OF MEDICINE AND SURGERY; MARY LEYLAND, DEPUTY DIRECTOR, VOCATIONAL, REHABILITATION AND EDUCATION SERVICE, DEPARTMENT OF VETERANS' BENEFITS; AND RALPH IBSON, DEPUTY ASSISTANT GENERAL COUNSEL

STATEMENT OF DR. JOHN A. GRONVALL

Dr. GRONVALL. Thank you very much, Mr. Chairman. It is a pleasure to have you recognize that invitation, and I look forward to working out a time where I can visit our VA facilities in Illinois, and I thank you for your kind invitation.

I appreciate also that you have introduced the panel of VA people who are here with me, and what I would like would be to summarize the written statement that we have prepared for the hearing today, but I would ask that the full statement be incorporated into the hearing record.

Mr. EVANS. Without objection, so ordered.

Dr. GRONVALL. Mr. Chairman, I would want to start out by saying that I am particularly pleased to be here along with these other people from the VA, because it is my judgment and I think we have heard evidence of that fact, that with the help of our advisory committee, the changes that have been made in the VA really represent a success story as far as women's issues are concerned.

At the very outset, I want to add my thanks and congratulations to the Advisory Committee; recognize Col. Lorraine Rossi, who chaired the committee when it started, and General Holm, who now chairs the committee. I listened carefully to General Holm's testimony. The only thing that she said that I would want to disagree with is that her statement was far too modest about the role of the Advisory Committee.

I think it is very clear, as I have seen this issue evolve during recent years, that the role of the Advisory Committee and of Colonel Rossi and General Holm has been a critical one and that they deserve a very large share of the credit for what has been accomplished.

I use the term success story, and I believe that is true, and I use that term not to suggest that the job is done, because it clearly is not done. The testimony we just heard serves eloquently, I think, to point out that there is much more to be done; but I am pleased to testify very explicitly that the Administrator of Veterans' Affairs, General Turnage, is pledged and committed to continue these strong efforts and I am pleased also to pledge my own continuing support.

The background of this story I think is all in evidence, so I can be very brief. When the General Accounting Office in 1982 published their report, they concluded that very strong actions were needed to ensure that men and women had equal access to health care in the VA. At that time, women did not receive complete physical examinations and necessary gynecologic care, and there were a number of other problems pointed out.

The Department of Medicine and Surgery quickly concurred with these recommendations, established criteria for each of our medical centers that would assure adequate and equitable care for female veterans coming to us for health care.

So we created specific definitions that a complete physical examination for women would include breast examination, pelvic examination. We defined the need for inpatient gynecologic services and outpatient gynecologic services and the necessary referral procedures for obtaining services that were not available at the individual facility.

We put out directives that our medical centers should take steps to ensure that projects were planned and completed to correct privacy problems, and many of those projects of course have been underway.

Prior to 1983 we had nine of our medical centers that relied totally on fee basis care as the way of providing gynecologic care. Since that time, every VA medical center has added at least one additional way of providing gynecologic services; and currently every one of our medical centers provides gynecologic service.

It has been pointed out that again at the time of the GAO report only 6 of our 16 domiciliaries had facilities for women. Now all but two of them do; and of those two, Hampton has a new construction project, which is in the final stages. When that is completed, in June of 1987, that domiciliary will be able to admit women, and at West Los Angeles a total renovation project is in the planning stage, which will correct those problems, but in the meanwhile we are arranging interim funding to correct the privacy deficiencies in a portion of that facility.

Every new VA domiciliary which is created or activated will be able to provide care for women.

As has been pointed out, the first VA mammography unit opened at Minneapolis in 1984. I am pleased to be able to say that this year, six additional units are being funded at Hines, Allen Park, Buffalo, Martinez, Portland, and West Roxbury.

Again, the Women's Advisory Committee has monitored all these activities, been extremely helpful to us, made constructive recommendations; among them the appointment of women coordinators which has been accomplished not only at every medical center but at each of our regional offices for veterans' benefits.

Although in the record and here today, health care has received the most specific focus. I should mention for completeness' sake that veterans' benefits to women through our Department of Veterans' Benefits have been an important part of the VA program and at the current time, 31,768 women receive service-connected disability compensation and disability pensions have been granted to 10,405 women. During last year, 5,546 VA guaranteed loans were closed by women veterans.

We continue to seek through outreach activities women veterans to ensure that they receive the benefits that they are entitled to.

Mr. Chairman, I would just point out that we have made available here today many copies of a very small brochure titled, "Women Are Veterans, too!" This is only one, of course, of the publications of the VA intended to make women aware of their benefits.

The simple statement on the title of this brochure, "Women Are Veterans, too!" symbolizes the categorical commitment of the VA that all women veterans should receive in full measure benefits and services that they have earned in service to their country, and we pledge to continue that effort.

Mr. Chairman, this concludes my formal statement, and I and my colleagues will be pleased to answer any of your questions. Thank you very much.

[The prepared statement of Dr. Gronvall appears at p. 109.]

Mr. **Evans**. Thank you, Doctor. I appreciate your testimony today.

You just spoke about the efforts to make women veterans more aware of their benefits and outreach programs, but the use of veterans benefits by women veterans has been considerably less than their male counterparts. In fact, the 1985 Harris Study of women veterans found that women veterans were not aware of their benefits.

I think we need to do more. Could you recommend anything else that could be done within the Veterans' Administration to further publicize the rights of women veterans to their benefits and to draw them into the system?

Dr. **Gronvall**. Others here at the table may be able to add to this. I surely agree with you that this is a job not done and that continued active efforts of outreach not only by the VA itself but by the service organizations, and I am pleased that you will be hearing from them; all of these efforts need to continue and to be strengthened to ensure that we change that finding and make sure that women in fact do know about the benefits that they are entitled to.

In our full written statement we point out a number of specific activities that have been accomplished and are under way with the help of the Advisory Committee to try to reach out to the woman veteran community and assure that we have success in that area.

Mr. **Evans**. Well, then there is the other side of the equation. The lack of awareness, perhaps, within the Veterans' Administration and the insensitivity mentioned by some witnesses. To use the veterans' center program as an example, I am not aware of any counseling sessions or programs designed specifically to help women veterans. This is something to explore. I would hope that we might and that we are all learning; particularly in that program because there perhaps is an insensitivity, a lack of service to those women veterans.

I might say, my mother was a nurse, not in the service, but I know the extraordinary stress nurses experience. Because the largest number of women veterans of the Vietnam-era were women nurses, it might be keyed to the extraordinary stress that they face, not only as nurses but as combat nurses.

I am trying to raise awareness there. Do you have any comment?

Dr. GRONVALL. I appreciate that, and I would like to comment. Our vet center program in fact does see a large number of women Vietnam veterans. In fact, we reviewed the statistics and the proportion of women veterans seen in counseling sessions in our vet center program exceeds the proportional representation of women in the Vietnam military forces.

So by that measure, one would conclude that in fact the vet center program has reached a slightly higher proportion of women Vietnam veterans than male Vietnam veterans. Five percent of the team leaders in our vet centers are in fact women, and out of the total counseling work force in our vet center program, some 14 percent of the counselors are women.

I believe that some active steps have been taken to try to reverse what everyone has agreed to was an earlier pattern of the assumption that all veterans were males.

Mr. EVANS. Well, I still do not see much participation. I know some women veterans go to my local vet center, but I am not sure that is true throughout the entire system. There is both perhaps a lack of awareness within the VA and perhaps some of the women veterans do not feel comfortable, or do not come out to the program. Maybe do not think it is open to women veterans.

This is a concern that several witnesses have expressed. I want to make that comment so we can examine it and try to further bring women in to the process.

I would like to ask a more general question. We have rejected, this committee on a bipartisan basis, the cuts that were recommended by—not by yourself but by the budget process. I am sure you are probably, off the record or on the record, not in favor of those kinds of huge cuts in the medical department.

My question is theoretical. If we had enacted those kinds of cuts or if we face those kinds of cuts in future budget years, particularly within the medical service, would not that really have a larger adverse impact on these kinds of improvements that are necessary for women veterans than perhaps other groups of veterans?

Dr. GRONVALL. You pose that as a theoretical question, and theoretical questions are hard to answer. The most honest answer I can give you to that is that if, in fact, the budget of the VA were to be reduced so we had to cut back on medical care and medical services, I think we would make a major effort to try to ensure that that cut was done equitably, so that there would not be a disproportionate negative impact on any particular aspect of medical care or any particular category of veteran recipients.

I think the part of your question that has the most meaning is that during a time of budget reduction, the first thing that falls by the wayside tends to be new activities that are developing or changes to programs to correct deficiencies in programs.

In that context, again as a theoretical question, I would agree that a major reduction in support for the VA might well have an unintended negative impact on some of the changes that have been planned or are underway or projected to be underway, dealing with the special capability, privacy, or special kinds of medical care, needs, expansion of mammography programs which would be important to women veterans.

Mr. EVANS. Well, this has not been just a theoretical question for the committee, of course. We have had to deal with the budget proposals. I think as long as Gramm-Rudman is on the books, we are going to continue to face problems with our budget as it affects veterans and perhaps preventing us from improving the programs to assist women veterans and other impacted groups of veterans.

I appreciate your answer, and it kind of confirms what I suspected, and I appreciate that very much.

Does the minority counsel have any questions?

Mr. KINGSTON SMITH. Thank you, Mr. Chairman, I do.

Some witnesses have asserted that the quality of medical services and counseling of female veterans is uneven. What is being done to ensure uniformity of quality medical services, examination and counseling for women veterans?

Dr. GRONVALL. I think perhaps the best person to comment on that would be Dr. Susan Mather, who has served as my representative to the women's advisory committee. Dr. Mather, as was pointed out in the introduction, is a physician in our central office, but has been in the center of all of the activities we have carried out to ensure quality medical services for women.

Dr. Mather?

Dr. MATHER. I think the single biggest thing we are doing to try to ensure that the policies are implemented across the board is to include services for women in the systemic external review process, SERP process, which is part of our quality assurance program. The SERP team that visits each medical center looks at the services for women as they do at the medical service and surgical service; that sort of thing.

So this is an institutionalized process. I do think it is important to point out, however, that not every medical center is a tertiary care center, as you are well aware, and that gynecology is basically a surgical subspecialty. The gynecologists might not like to hear me say it is a subspecialty; it is a surgical specialty. Therefore, if a hospital does not provide surgery to either males or females, then they would only be able to provide office gynecology; and those patients requiring surgical gynecology or surgery which is the bulk of gynecological services, would have to be referred to a VA medical center that did provide such care.

As far as our monitoring process, the SERP process is the primary review mechanism for that. There are still relatively few women served, and so we do try to look into specific complaints. My office welcomes specific time and place complaints that we can look into them.

Mr. **Kingston Smith**. To follow up on that, what mechanisms exist for hearing and responding to complaints and concerns of women veterans? I am referring to mechanisms within the VA itself?

Dr. **Gronvall**. I will make a general comment, and then others may expand on that. I have not noticed, since I joined the VA, that there is any inhibition to complaints being registered and having those attended to and responded to.

Across my desk pass I think about 1,000 pieces of correspondence a month. A significant part of that is questions, comments, many congratulatory messages, but also correspondence directly from individuals or through Congressional offices where someone has a question or a complaint about VA services.

As Dr. Mather just said, we are always open to receive a complaint; we always ask that we know the name of the person and State and some specificity about the problem, but I can absolutely assure you and anyone that any complaint that is registered with the Veterans' Administration will be followed up in detail and responded to. If we find that we were in error, and that occurs, we take steps to correct it in every instance.

Mr. **Evans**. Several witness statements have suggested that local women veterans' coordinators are basically overloaded and that they need more time from other duties to perform their coordination task. Please respond to that.

Dr. **Gronvall**. I would be pleased to. I would like to point out, I believe, that every time I visit our medical centers, I find that all of our staff are working extraordinarily hard and in their attempts to do their job, there is always a sense that they are overloaded.

The women coordinators have proved a very valuable asset; it has not been our judgment that that job requires a full time appointment at every medical center, so that coordinators of women's issues at medical centers have not been designated as full time.

I believe that system has worked; I think it has made a great contribution. The Department of Veterans' Benefits, without anyone having made that recommendation, took the same step in each of the DVB regional offices, and I think that that has made a real contribution.

Dr. Mather, you might comment on the amount of work that the coordinators do and how it varies from facility to facility.

Dr. **Mather**. I think there is no question that they are overworked; but as Dr. Gronvall points out, so are many other personnel, and directing a full time person at every medical center would mean a ceiling increase of 172 individuals. Or, it would mean taking away from another function to create this position. However, as the job becomes obviously an important factor in the medical center's operations, this will change. We have at least one station the Minneapolis VAMC that I am aware of that has recently designated a half time position.

So the situation is changing gradually and I think there will be more and more medical centers that will add resources as the load becomes greater.

Dr. **Gronvall**. Just one quick addition. A local committee has been established to work with the Coordinator so that workload really is shared by a whole group of people and that both spreads the workload but also makes a larger group of individuals committed to looking throughout the entire operation of the Medical Center to do whatever needs to be done to deal with the special problems that are found.

Mr. **Kingston Smith**. One final question. Is adequate statistical data and demographic data, being kept on women veterans by the VA?

Dr. **Gronvall**. The word "adequate" in your question, of course, makes that a judgment question. I think it's quite right that the data collection regarding women as a special group of veterans is a reasonably recent addition. I've been impressed within the past year or two when I've reviewed questions of women's medical care that it appears to me we have a great deal of data that quite well defines the number of women veterans State by State and medical center by medical center. We know the number of women we are caring for. I'm impressed that it is not a lack of data that is creating any significant problem now to our getting on with correcting the remaining problems that need to be corrected, to assure full access and availability of care for women.

Mr. **Kingston Smith**. Thank you, Mr. Chairman. No further questions of this witness. We will submit any additional questions for the record.

Mr. **Evans**. Thank you. Are women veterans now included in all studies conducted by the Veterans' Administration?

Dr. **Gronvall**. The answer to that would clearly be no, when you say "all studies conducted by the Veterans' Administration." There are literally hundreds of studies of various sorts, research protocols, involving small, middle sized and large groups of veterans. Clearly, women would not be included in every one of those hundreds and hundreds of studies.

Mr. **Evans**. No concern about the impact these studies might have on the women veterans? I'm not sure I understand.

Dr. **Gronvall**. My comment does not mean that is an active lack of concern about women veterans. What I meant was let us say a study is done in which there are a small number of patients that are included in a study with a specific kind of disease or problem. If it turns out that the patient experience at a given medical center or combination of medical centers doesn't include any women with that medical problem, that study of a specific medical problem would not include any women veterans.

Obviously, there are some specific medical problems that apply only to men and clearly women would not be included in that kind of a study. Likewise, on the other hand, some studies deal specifically with the medical problems of women.

Mr. **Evans**. Understanding that, except for those sex specific studies, is there any attempt, given the fact that women may not be participating within the VA Medical Center itself, to make sure we are just not studying only the traditional groups of people that use the VA? Maybe because there is a lack of awareness among women to come into the centers, outreach should be made to include them in the studies.

Dr. **Gronvall**. The answer to that is yes. I believe in all of the studies that I'm aware of where we do demographic analyses of the entire population of veterans by selected statistical sampling of groups of veterans, careful attention is given to the mix of women as well as other specific groups within the veteran population to ensure that those kind of statistical studies take into account women veterans.

There has been a particular problem in regard to a number of the Agent Orange studies, of course, where questions have been raised about the exposure of women and Vietnam veterans to Agent Orange and herbicides in Vietnam. Of course, we have had a good deal of correspondence with the committee about the problem of identifying a statistically valid number of women who were in Vietnam in areas where herbicides were in use and the difficulty in creating a statistical sample large enough and relating it to exposure indicators to do studies of that sort.

I can assure you from my own personal experience in the VA that none of those problems reflect lack of interest by VA staff or researchers in the problem of women veterans who may have been exposed to herbicides in Vietnam. They are scientific and statistical problems inherent in any of those kinds of studies where the numbers of individuals may turn out to be relatively low.

Mr. EVANS. I guess that's a matter of contention between us and the Veterans' Administration that is ongoing about the whole study.

Dr. GRONVALL. I well recognize that concern.

Mr. EVANS. Let me ask you if anyone in the VA is working to ensure that the 1990 census will be used to gather information on women veterans and to build on the baseline information which now exists?

Dr. GRONVALL. I can't answer that and I don't know if anyone here can. If we can't, we will surely look into that and supply the answer for the record.

Mr. EVANS. I would appreciate it if you could and also along with the minority counsel, I understand he is submitting some other questions, which we would ask you to answer.

Dr. GRONVALL. We would be pleased to.

[Subsequently the Veterans Administration submitted the following information:]

The Veterans Administration participates in OMB's Federal Council on the 1990 Census. It has been agreed that the 1990 Census will include the veteran status question for both men and women.

Mr. EVANS. Thank you very much for coming today.

Dr. GRONVALL. Thank you very much.

Mr. EVANS. We will call the next panel of government agencies, the Department of Labor, being represented by Ms. Shirley Dennis, Director of Women's Bureau, who is new onboard, I understand, who will be accompanied by the Honorable Donald Shasteen, Assistant Secretary of Labor for Veterans' Employment and Training. Curtis J. Smith, Associate Director of Career Entry representing the Office of Personnel Management. The Small Business Administration represented by Mr. Dick E. Ellis, Director, Office of Veterans' Affairs.

Ms. Dennis, we will ask you to proceed and ask that you keep your remarks in summary as much as possible. We will include the full body of your remarks in the record as we will with the other panelists. You may proceed.

STATEMENTS OF SHIRLEY DENNIS, DIRECTOR, WOMEN'S BUREAU, DEPARTMENT OF LABOR, ACCOMPANIED BY HON. DONALD SHASTEEN, ASSISTANT SECRETARY OF LABOR FOR VETERANS' EMPLOYMENT AND TRAINING; CURTIS J. SMITH, ASSOCIATE DIRECTOR FOR CAREER ENTRY, OFFICE OF PERSONNEL MANAGEMENT; AND DICK E. ELLIS, DIRECTOR, OFFICE OF VETERANS' AFFAIRS, SMALL BUSINESS ADMINISTRATION

STATEMENT OF SHIRLEY DENNIS

Ms. DENNIS. Thank you very much, Mr. Chairman. I'm pleased to have this opportunity to make a presentation before this committee and before I begin, I would like to introduce Donald Shasteen, who is the Assistant Secretary for Veterans' Employment and Training in the Department of Labor. As you know, Mr. Shasteen directs the major programs for veterans in the Department and is certainly an ally of the Women's Bureau in our efforts to better understand the problems and needs of women veterans.

We have done a number of things within the Department of Labor and within the Women's Bureau to draw attention to the problems of women veterans and to try to seek some solutions. What I'd like to do in my few minutes, Mr. Chairman, is to focus on those efforts.

First of all, I think it is important to note that part of the reason we are deeply concerned about what is happening to women veteran is that it is a part of an overall Workforce 2000 Project, that Secretary Brock has initiated. It is an effort to look at the needs of the workforce in the future and to examine what will happen to jobs in the future. Part of our major concern for the needs of women veterans has to do with our Workforce 2000 Project.

I think we are very proud of our work with the Veterans' Administration Advisory Committee on Women Veterans, spoken about so eloquently this morning by Major General Holm. I am a member of that committee. I'm very proud of the work of that committee and of our participation in the Women's Bureau.

I think another effort that we are very pleased to tell you about is a study that was done in collaboration with the Assistant Secretary for Veterans' Employment and Training through a contract with the American Veterans' Committee. This was the first research done on women veterans' employment. You will hear more about that study from June Willenz, who will testify later.

Also I think it is important to note that the Women's Bureau again in conjunction with our vets' program in the Department of Labor has a joint project in the State of Washington that we have funded for the purpose of determining what we can do to help women veterans who are using the employment services in the State of Washington, in Everett. That came about because of concerns that that particular employment service office noted.

We think these efforts that we are engaged in, in that program, will bring about better employment for women veterans. We will learn some more about their needs. We will also be able to use that data in the future to better assist women veterans.

Very recently, in fact last month, the Women's Bureau co-sponsored a conference in Region III, which was in Philadelphia, for the purpose again of helping women veterans to become very aware of the services that are available to them, to give them a platform on which they could discuss their concerns, their problems, and learn how to receive assistance.

I guess I would summarize my presentation in this manner, Mr. Chairman. I would say what we have learned about women veterans is challenging. We have begun taking steps to assure that women veterans know more about the range of occupations open, the types of training required for jobs in the future and particularly the special assistance available to them. These efforts, however, do not exist in a vacuum. As I said at the outset, the Labor Department is actively looking toward the future. We hear it coming and we are preparing to meet it.

Workforce 2000 is a serious attempt to ensure that we can match workplace needs with workers' capabilities. Women veterans like most other groups of the labor force, will benefit from these efforts.

Thank you, Mr. Chairman.

[The prepared statement of Shirley Dennis appears at p. 114.]

Mr. EVANS. Thank you. Mr. Smith?

STATEMENT OF CURTIS J. SMITH

Mr. SMITH. Thank you for providing OPM the opportunity to testify on the provisions of benefits and services to women veterans.

We strongly support efforts to help our nation's women veterans. The Federal Government conducts a variety of employment activities to help veterans gain employment and skills as they move into the main stream of civilian life. We are pleased that these programs are helping a substantial number of women veterans as well.

There are now some 34,000 women veterans employed throughout the Federal Government in a wide variety of occupations.

Let me briefly explain these employment programs.

Under our competitive hiring procedures, women, like men veterans, receive established veterans' preference. Further, women benefit under special authorities for the non-competitive appointment of veterans generally.

The veterans' readjustment appointment authority or VRA, allows the non-competitive appointment of Vietnam-era veterans to Federal jobs with conversion to career or career-conditional status after 2 years of satisfactory training and service.

In fiscal year 1985, over 1,300 women veterans gained Federal jobs through the VRA Program. Since the program was created in 1970, over 20,000 women veterans have benefitted by receiving these appointments.

The Federal Government has benefitted from the VRA hiring as well, through the higher retention rate of these employees.

OPM takes a variety of steps to encourage the use of this successful program, including publicizing the program, distributing job information to potential employees, cooperating with the VA and the

Department of Labor and training Agency personnel involved in using the program.

Of the 34,000 women veterans employed by the Federal Government, over 2,800 are disabled. Under the Disabled Veterans Affirmative Action Program, OPM actively helps agencies develop and implement programs to improve the employment and job advancement of disabled veterans.

Veterans who are 30 percent or more disabled can be hired under a special authority on a non-competitive basis. In fiscal year 1985, over 200 women veterans were appointed under this authority. The Government now employs over 900 women veterans who are 30 percent or more disabled.

We believe these programs as part of the Administration's strong commitment to veterans are working effectively to help women veterans as well as men. In the future, we will continue our positive efforts to provide women veterans the greatest help that we can, as they deserve.

Thank you. I would be pleased to answer questions.

[The prepared statement of Curtis Smith appears at p. 120.]

Mr. EVANS. Thank you. Mr. Ellis?

STATEMENT OF DICK E. ELLIS

Mr. ELLIS. Thank you, Mr. Chairman. Thank you for affording us the opportunity to discuss the Small Business Administration's veterans' programs, specifically as it affects the many women who honorably served in the Armed Services of the United States.

In 1974, the Congress mandated SBA provide special consideration for veterans in all of its programs. The SBA has worked closely with the Congress, the national veterans' organizations and many veterans who are volunteers to define and implement a meaningful program for veterans.

Therefore, since then, the SBA has had in effect the Offices of Women's Business Ownership and the Office of Veterans' Affairs.

Today women make up 4 percent of the veterans' population, but in many cases we do not keep separate statistics, as our congressional mandate requires us to serve all veterans. However, during fiscal years 1983 to 1986, women received about 8,000 SBA loans for a total of $845 million or 8 percent of all SBA loans; 7 percent of these 8,000 loans were made to women veterans. This means that about 539 loans or $65 million were made to women and women veterans in particular. Of this total, Vietnam-era women veterans received 27 loans which totaled $1.4 million.

Our records, Mr. Chairman, show that women veteran entrepreneur entered mostly into retail trade and service type industries. The Small Business Administration has helped launch so far two new car dealerships, a boat dealer, an electrical contractor, a plumbing contractor, and an airport flying service, and they are all women veterans. These businesses are located in 44 of our States, Texas, California, Missouri, Nevada, Louisiana are the top five, of women veteran ownership.

We were surprised and sad also to learn that women veterans are substantially less likely than their non-veteran counterparts to be small business owners. Why? The experts can give us only theory but we tend to think that during the time veterans spend in service away from the main stream, their counterparts make more contacts within the business world and gain more business related experience than the woman veteran does. Also, veterans make such good workers and they are more likely to become successes as salaried employees in somebody else's business, that they never take the opportunity to start their own small business.

Another study showed, Mr. Chairman, that when veterans return, they continue to use the skills they brought back from military service, such as electronics, security, computer knowledge, and these areas. These areas also have a very low instance of self employment.

We feel all these facts combined make strong arguments for continued special veterans' programs for men and women.

The likely next question is what is SBA doing for women veterans in particular? The answer is our customers are Army and Marine green, Air Force, Navy and Coast Guard blue and we are concentrating our programs on all veterans, and many women participate in our activities.

SBA's Veterans' Affairs is this year launching training projects around the country, adding up to more than half a million dollars. The pilot of these entrepreneurial courses was launched last year in cooperation with the U.S. Department of Labor and the State of South Carolina. To date, 60 specially selected veterans are being trained in a 20 month program that involves counseling sessions and classroom work on business start up. So far, 16 of these veterans have already started their own businesses and at least 85 percent of these students are expected to eventually start a business. I'm proud to say the 16 businesses that have already started have thus far created a total of 31 new jobs in South Carolina and many of them are for veterans.

The Small Business Administration also operates a toll free answer desk number, used to answer questions from potential new business owners. Last year, over 4,000 of our calls were from veterans and the most frequently asked question was,"How do I start a business?"

Our statistics show most small businesses in America that fail do so within their first 3 years of operation. The reasons are mainly lack of management skills and secondly, the lack of adequate capital. SBA is marshalling its resources in every State to combat these failures. We rely on SCORE, the Service Corp of Retired Executives, to volunteer their time and experience to help the young entrepreneur get on his or her feet and stay there. We are also in the process of creating veterans' business resource councils in the major areas. They are volunteer groups of active business executives who also reach out to the new business owner.

SBA regional and district offices plan to hold more than 200 prebusiness workshops and conferences, including tax seminars, business problem clinics, procurement, and franchise affairs during this year for veterans.

Due to a mandate from the 99th Congress, the Small Business Administration is also in the process of hiring 10 new Veterans' Affairs officers, one for each of our 10 regional offices. This will greatly increase our outreach and educational programs.

It's been a pleasure to be here to tell you about the SBA's story today and with the guidance of our new Administrator, former U.S. Senator James Abdnor, it's a pleasure to serve our nation's veterans, both men and women, Mr. Chairman.

[The prepared statement of Dick Ellis appears at p. 122.]

Mr. EVANS. Thank you, Mr. Ellis. Mr. Ellis, let me bring everybody's attention to part of your testimony. It indicates, I think, that women veterans, you are suggesting, are less likely to become small business owners. Does this suggest that women veterans aren't particularly interested in small business opportunities? If that is so, can you document that?

Vietnam Veterans of America, represented by Mary Stout, has submitted testimony saying that studies found that women veterans succeed in earning "substantially more in self employment than their non-veteran peers, once they are able to surmount the barriers to business entry."

I understand that the VVA and the National Advisory Committee on Veterans' Business Affairs at the SBA has recommended one or more pilot outreach programs for women veterans, but for the past 2 years, funds allocated for those kinds of programs have been turned back to general funds and yet not one specific program for women veterans has been attempted.

Mr. ELLIS. Yes, sir. I have been in my position for about 3½ months, Mr. Chairman. We have taken strong initiatives in the area of serving women since I have been there, that is stronger than before.

We have launched a number of pilot programs, as I said in my testimony, sir. We have five $100,000 projects we will launch this year and they will include a great deal of women. We also require that 10 percent of these people be disabled veterans.

Mr. EVANS. What about one or more pilot outreach programs directly for women veterans? We have heard testimony here today that the women veterans are perhaps in a special position once they are discharged, that they don't have the kind of family support systems and so forth, and even the younger veterans now may be single parent families with a child or children.

If women are not participating and if we have allocated the money for these kinds of outreach programs, why couldn't we specifically try a program or several programs specifically targeted for women veterans, understanding some of the societal and economic barriers they face, to include them more.

Mr. ELLIS. Yes, sir. When I was doing some investigation for these facts and figures for this testimony, I found our office, the Small Business Administration, is almost like a chicken and egg situation, sir, and that is we have the Office of Women's Business Ownership, a separate organization for women's business ownership and then we have the Office of Veterans' Affairs. We serve any veteran that walks in the door, male, female or whatever.

A lot of these women veterans would have a tendency to go to the Women's Business Ownership Conference more so than if we would hold a specific veterans' conference. We share many of the same customers. We share many of the same statistics with our Women's Business Ownership Office.

Mr. EVANS. They are not keeping statistics of the women veterans that they serve in that office, the Women's Business Ownership Office?

Mr. ELLIS. Yes, sir. In many cases, a woman will walk into a Women's Business Ownership Conference and not identify herself as a veteran. If they come to our shop, they specifically identify themselves as veterans. We cannot identify exactly how many women veterans participated in Women's Business Ownership programs because we were not aware they were veterans.

Mr. EVANS. In order to establish a statistical basis, and perhaps make it easier for you when you come up to testify before subcommittees like this, I wonder if that couldn't be initiated? I'm not quite sure I understand where you keep statistics on women veterans and where you don't.

In your statement you said "That women make up 4 percent of the veteran population, but in many cases we do not keep separate statistics as our congressional mandate requires us to serve all veterans."

I understand that, but I don't know why in serving all veterans, you couldn't specifically keep statistics about women veterans. You have some good statistics. Maybe you can improve your case. I think that would be very useful in assembling a body of information along with some of the other things that we are asking other Federal agencies to do, to give us a clear picture of how women veterans are being served or not being served by the various Federal agencies that are there to help them.

Mr. ELLIS. We keep separate statistics in the Veterans' Affairs Office. We keep separate statistics on women veterans. We went to our counterparts next door, the Women's Business Ownership, and asked them, can you tell us how many women veterans you have served, and they said, no, we just serve women. We have asked them in the last 60 days if they would begin keeping this information and share the statistics with us.

Mr. EVANS. Has SBA ever contacted the VA's Advisory Committee on Women Veterans and the veteran service organizations or other groups to seek their advice about how to better serve women veterans?

Mr. ELLIS. Yes, sir. I spoke before them last week. We are working together.

Mr. EVANS. Let me yield to the minority counsel.

Mr. KINGSTON SMITH. Thank you, Mr. Chairman.

To follow up on something you touched on in one of your questions, is it correct that SBA for the past 2 years has turned back to general funds. Some funding for veterans' outreach and training?

Mr. ELLIS. It is my understanding, sir, and again, I have only been there for 3½ months, it is my understanding that has happened in the past; yes.

Mr. KINGSTON SMITH. Could you respond for the record with the amounts of money turned back?

Mr. ELLIS. I do not have those statistics, sir.

Mr. KINGSTON SMITH. Could you provide them for the record?

Mr. ELLIS. Definitely; I'd be glad to.

[The Small Business Administration subsequently submitted the following information:]

The amount of money turn back was $814,000.

Mr. **Kingston Smith**. Thank you for the opportunity to question this witness, Mr. Chairman.

Mr. **Evans**. I want to ask a few other quick questions to some of the other agencies. For the Department of Labor, educational achievement of our women veterans is comparatively high. For example, for women veterans placed by public employment offices—educational achievement is high, but wages and income are low. The starting pay for women veterans placed by public employment offices is less than $5.00 an hour, according to a study done by the American Veterans' Committee. These women had military service experience and 40 percent had completed college and, as General Holm indicated, good experience in the military.

Why then are wages and income of women veterans so low?

Ms. **Dennis**. Mr. Chairman, I am going to yield in a moment to Don Shasteen, but I'd like to just comment that we are very pleased with our demonstration program in Washington, the State of Washington, because we are lifting that starting rate for one thing and we are showing that when women veterans are given the kind of support and the kind of training and the kind of self confidence, that they do go after the better paying jobs and they are doing very well.

The average placement wage we are experiencing in our demonstration project is something like $7.43 per hour. There is hope that we can reverse what you have just discussed in terms of what some studies have shown.

I would like to yield to Don Shasteen who may have a broader interpretation of your question.

Mr. **Shasteen**. Yes, sir. Mr. Chairman, I want to express appreciation both to Mrs. Dennis and to you for enabling me to be here today to participate in this hearing. I want to commend the committee and especially the chairman for the attention that is being focused on the problems of women veterans.

I owe a debt of gratitude to Ms. June Willenz, who will testify in a little while, who came to me about 3 years ago and suggested that this problem needed special attention by our agency. She revealed some information that she had collected on her own. Out of that conversation came the study which she conducted.

I think you will find that she learned in her study that most of the women who were going to the employment service were former enlisted personnel who required additional employability assistance prior to job placement. In other words, they had barriers to employment which had to be resolved before they could be successful on the job. Very few officers came to the public employment service for assistance, so no comparisons between the two groups could be made.

I think that perhaps there was a weakness of the system at that time, which we have been addressing and which we have been correcting over the period of the past 3 years. It also raised with us the issue of why many of the women who come to the employment service end up in low paying jobs. The Everett, Washington project has been an outgrowth of that study. Interestingly, we established a wage goal for placements in that program of $5.00 per hour. As

Mrs. Dennis has testified, the average rate is $7.43 per hour. The highest paying placement happens to be an electronics technician job at Boeing Aircraft Company that pays $9.95 an hour. The lowest wage paid to any woman placed in that program is $5.05 an hour.

This is ahead of the goal that we established for the project, which shows, I think, that when you address the problem of women veterans' unemployment as a group, you go out and look for the women who need the help and you bring them together, and they form a support group. If you provide the right kinds of services and the right kinds of support for them, their confidence increases. They get the training they need. Fifteen of those women in that program received institutionalized training. It is part of what we have been calling in our agency the whole person concept, providing whatever the individual needs to get the kind of job that person needs to support herself or himself and their family.

We have learned from that project and we hope to transfer now that knowledge to other projects that we conduct for training and placing veterans in jobs.

I want to mention in reference to the training program, the entrepreneurship training program that Dick Ellis mentioned, five more projects. One of the things we can do is that we will study in our agency, just as we specified, that there be 10 percent disabled veterans included in a program. There is no reason why we can't look into specifying a certain percentage of women veterans in a training program, whether it be entrepreneurship training or other training, that we undertake.

That's our prerogative in offering the funding to the States and the agencies that provide this training for us. We can do that.

Mr. EVANS. I think that's an excellent idea and we salute you for taking that prerogative and making it a very positive way of trying to help women veterans.

Let me yield to the minority counsel for a follow up question.

Mr. KINGSTON SMITH. Ms. Dennis or Mr. Shasteen, could you tell us more about the specific types of outreach and specific mechanisms being used for outreach to women veterans for employment and training through Department of Labor programs?

Ms. DENNIS. Let me begin by saying that in the Women's Bureau, our role is to act as an advisor internally within the Department and as advisors and advocates outside the Department to see that women, all women, are given the best opportunities possible for employment. That is our reason for being deeply involved in employment opportunities for women veterans.

We are anxious to see that the programs within the Department of Labor and generally across the Federal Government as well as private industry pay attention to the fact that women are veterans, too, and they have a great deal to offer in civilian life.

We pay a great deal of attention to what is happening in job training programs.

Mr. KINGSTON SMITH. How do you do that?

Ms. DENNIS. We do that by serving on various committees. I have already indicated that our Bureau is a part of the Advisory Committee on Women Veterans of the Veterans' Administration. We serve on various other boards and committees and within the Department of Labor, I serve on the Policy Review Board and I'm a part of the Secretary's senior staff. Don Shasteen and I and others within the agency are in constant collaboration on ways in which we can improve opportunities for workers and in the case of my work with Don, we have worked specifically on ways to improve opportunities for women veterans.

I'd like to now yield to Don Shasteen.

Mr. SHASTEEN. Let me just add the major outreach is through the Disabled Veterans' Outreach Program, which is part of the employment service. The employment service is our delivery system for jobs for veterans. We are working constantly to improve that system which means improving the entire employment service.

Interestingly, out of this Everett project, one of the first persons employed, and this was done separate from the conduct of the project itself, but one of the first persons employed was a 53 year old person who went through this program and she applied for and was hired as a Disabled Veteran Outreach Program specialist in the local job service office, which was responsible for conducting the program.

Just 2 days ago, a second female in this training program was hired as a Disabled Veteran Outreach Program specialist in one of the job service offices in Seattle.

If women who are trained, who come into the system, who apply to the job service for help, end up eventually in these jobs, these DVOP jobs with the employment service, you can bet your boots that we are going to improve the outreach effort to women veterans. I think that is one way it can be done and one way that just happens to be working out.

Mr. KINGSTON SMITH. Thank you, Mr. Shasteen.

Mr. EVANS. Thank you. Could you tell us the unemployment rate for that growing number of women veterans of the post-Vietnam era?

Mr. SHASTEEN. Mr. Chairman, we do not have statistics for women veterans' unemployment. We do have, as you know, for Vietnam-era veterans, and those figures, the most recent monthly figures were 5.3 percent for Vietnam-era veterans; 5.5 percent for all veterans. The group of women veterans is so small in relation that I think as testimony indicated earlier today, we don't have a valid sampling in the data that is gathered by the Bureau of Labor Statistics to give us really valid figures.

Mr. EVANS. If I recall correctly, General Holm testified that one of the largest groups of women veterans is post-Vietnam era women veterans. If you keep them for Vietnam-era women veterans, why can't you keep them for the post era group of women veterans?

Mr. SHASTEEN. I think that what we have to do—I have discussed this problem with Commissioner Norwood, and I think about the only way that we have been able to do that for disabled veterans, for example, because they also constitute a relatively small group, is to have a special one shot survey conducted. I'm not familiar with the information that she presented earlier. I do know that our Agency has teamed up with the Veterans' Administration to fund a special one shot survey of the employment and unemployment problems of disabled veterans. We have another one of those coming up very shortly.

I would be glad to look into the need for and certainly look at the cost of, because it is an expensive item, the cost of doing that for women veterans.

Mr. **Evans**. I realize the expense. I would like you to look into it and perhaps respond by letter as to what the possibility of that might be. This is one of the largest growing number of veterans and to have the proper kind of programs tailored, outreach programs for the Small Business Administration or the Department of Labor or whatever else, I think we need to know.

Mr. **Shasteen**. I would certainly agree. We need more information.

Mr. **Evans**. Could you also very quickly tell us more about the program which provided information to women who are separating from the military service? What is the status of that program today, has it been used in other parts of the country and what the response to the program? Ms. Dennis?

Ms. **Dennis**. I think that program was a program conducted by Don Shasteen's office. I would say we are very pleased that there has been such an outreach and would urge that kind of effort be continued.

Mr. **Shasteen**. Yes, sir, Mr. Chairman. That is a part of a separation project we started 2 years ago to develop a model system for providing more responsive services to people coming out of the military, men and women alike. We have now put together the plan. The Army has joined us in this effort and has expanded the concept considerably. As a matter of fact, in its present mode, that program will begin a full year before discharge, with the Army instituting procedures that they are developing now to try to persuade people who are planning to leave military service to stay in the service.

They recognize there is an increasing degree of competition for those young people in the recruiting age that they need, increasing competition because of the shrinking numbers of persons in that age group, in the work force, and because private industry is going after that same group.

They are really changing their whole approach. They are going to start a year ahead of time. If the individual feels he or she have not received the training they want, they will offer them, if they stay in, the kind of training they want to get, that they feel will help them when they eventually leave military service. If after 9 months, the Army has not been able to convince them to stay in, then we in the employment service will be getting access to those people to work with them to try to relate the skills they have acquired in the military with the skills that are needed in the civilian economy and whatever area of the country they plan to move to when they leave military service.

If an individual coming out of the military service finds that her home town, for example, does not have the kind of employment that would draw on the skills she either brought into the military or she acquired in the military, then we will counsel with that veteran to help her select another area of the country where her skills can be utilized and where she can earn a higher rate of pay perhaps.

We will be endeavoring not only to help from a humanitarian standpoint, but also we believe we can be very cost effective, because today, the military is paying somewhere in the neighborhood of $140 to $145 million a year in unemployment compensation to more than 100,000 separating military personnel who don't have a civilian job within 4 or 5 weeks after they come out of military service. If they don't have such a job, they can begin drawing up to 13 weeks of unemployment compensation and we find that normally, once they start to draw unemployment compensation, these people will draw for a period between 11 and 12 weeks. It becomes a rather expensive item. It also ends up with many of them being long term unemployed and becoming much greater problems than if we can get them into jobs within the first month after they come out of military service.

Mr. EVANS. That's an interesting program and concept. I remember a re-up lecture by the Marine Corps myself. After that, I could have used the follow up by the Department of Labor.

I understand that as far as women veterans are concerned, this program was a pilot project only in Region III, which would cover Delaware, Maryland, Pennsylvania, Virginia, West Virginia, and the District of Columbia. Military separation centers in that region were contacted and provided with a packet of information, leaflets on occupational outlook apprenticeship, training, and a list of community based organizations to contact for assistance.

That was only offered in the military separation centers. That was a model program at the time?

Mr. SHASTEEN. I will have to get some information for you on that.

Ms. DENNIS. I think we are talking about two different programs. The one that you asked about and that you are reading from my testimony was an effort on the part of the Women's Bureau. What Don is responding to was a corollary effort, initiated out of several of the bases, one in North Carolina. The kind of great minds were sort of coming together during that process, I believe within the past year or two.

Mr. EVANS. I'm sorry for mixing apples with oranges.

Ms. DENNIS. I don't think it was your fault at all, Mr. Chairman.

Mr. EVANS. Since women veterans are not always aware of their benefits, the kind of program that you referred to in your testimony would be one to expand to other regions if possible. I hope you will take a look at that and perhaps keep us advised on the further implementation of that.

Ms. DENNIS. Absolutely. Mr. Chairman, I would just like to say that we are very proud in the Women's Bureau to have a woman veteran heading up one of our regional offices. She keeps us very sensitive internally within the Bureau to the continuing concerns and problems of women veterans. We expect to stay very much on top of the issues and doing what we can do.

Mr. EVANS. I have several other questions, but will submit them in writing and ask that both the minority counsel and our questions might be answered by you in writing.

[The information referred to appears at p.162.]

Mr. EVANS. Thank you very much for your time today.

Ms. DENNIS. Thank you.

Mr. EVANS. Next we will call our panel of veterans' organizations. The American Veterans' Committee, represented by June Willenz, Executive Director. Disabled American Veterans, represented by Richard Schultz. Veterans of Foreign Wars, represented by Mr. Gordon R. Thorson, Special Assistant, National Legislative Service. The Vietnam Veterans of America, represented by Ms. Mary Stout, National Secretary. The American Legion, represented by Mr. Paul S. Egan, Deputy Director, National Legislative Commission, who is accompanied by Mr. Rodney S. Kirk, Assistant Director, National Veterans' Affairs and Rehabilitation Commission.

I have been very pleased to introduce the women veterans knowing some of their backgrounds. I know Mary Stout has been an outstanding advocate for not only women veterans, but all veterans. I reviewed her testimony yesterday which she presented as VVA's legislative priority package for this year and this session of Congress.

Mary was in the Army Nurse Corps in Vietnam in 1966. She served in Vietnam in 1966 and 1967 in the Second Surgical Hospital. Mary has also thrown her hat into the ring for the presidency of the Vietnam Veterans of America. It would be an outstanding achievement, one of our federally chartered veterans' organizations, if they in fact had a woman as their national leader. We wish you the best of luck. I have appreciated working with you on numerous occasions on every veteran's issue, from POW's, MIA's, to the homeless veterans to unemployment, across the board.

You have just always been there, Mary. We are very pleased.

June, I'm not aware of your military record. Perhaps if you have it, you can brag it up a little bit yourself. I would appreciate it.

Ms. WILLENZ. I'm not a veteran myself. I've been the Executive Director of the American Veterans' Committee for over 20 years and have been an advocate for veterans, as many people here know, and particularly for women veterans.

Mr. EVANS. We appreciate that. That is very admirable. We appreciate the other veterans' organizations being with us today. I think that shows a sincere interest in women veterans. We appreciate your coming as well.

Why don't we start right the way we introduced everybody. We will ask you all to give your comments in a summary manner and we will incorporate the full body of your statements in the record.

June, if you would please start.

STATEMENTS OF JUNE A. WILLENZ, EXECUTIVE DIRECTOR, AMERICAN VETERANS' COMMITTEE; RICHARD F. SCHULTZ, ASSOCIATE NATIONAL LEGISLATIVE DIRECTOR, DISABLED AMERICAN VETERANS; GORDON R. THORSON, SPECIAL ASSISTANT, NATIONAL LEGISLATIVE SERVICE, VETERANS OF FOREIGN WARS; MARY STOUT, NATIONAL SECRETARY, VIETNAM VETERANS OF AMERICA, INC.; PAUL S. EGAN, DEPUTY DIRECTOR, NATIONAL LEGISLATIVE COMMISSION, THE AMERICAN LEGION, ACCOMPANIED BY RODNEY S. KIRK, ASSISTANT DIRECTOR, NATIONAL VETERANS' AFFAIRS AND REHABILITATION COMMISSION

STATEMENT OF JUNE A. WILLENZ

Ms. WILLENZ. Thank you, Mr. Chairman. It's a great pleasure to be here. I will try to summarize as quickly as possible. I want to also commend you for holding this hearing at this time. It's just a little over 4 years that those historic hearings were held that focused for the first time on women veterans and the VA Advisory Committee was created.

I might just add that my organization, the American Veterans' Committee, had been lobbying for a number of years to have such a committee, going back to 1977, when the National Academy of Sciences in its report on VA Hospital Systems, specifically said "This report will not include women veterans." We have come a long way.

I'm very happy that I was asked to serve on the Advisory Committee on Women Veterans, which I have until the end of my term last December. Having been one of those who had suggested formation of the committee, I can attest to the accomplishments of the committee and the responsiveness of the VA.

In my book "Women Veterans, America's Forgotten Heroines," I outlined some of the many practices and lack of data, et cetera. Many of these have been addressed successfully and are still being addressed.

As an advisory committee, this particular group originally under the leadership of Lorraine Rossi, has come a long way and has accomplished a great deal in a very short time. I don't want to go on throwing bouquets. There are still many things to be done. I will just briefly summarize the rest of my testimony.

I do want to mention that the historical background is very important. The story of women veterans falling through the cracks of the established framework of veterans' benefits, despite so-called legal equality, demonstrates that this standing in some instances does not necessarily mean that all segments of a targeted population benefits. I think we should keep that in mind, because with the shrinking resources throughout the Federal Government, the last come will be the last served. Unfortunately, the women veterans have been the last recognized among the groups within the veterans' population.

Therefore, I think whatever can be done must be done. We must always keep in mind that it is ironic that finally when women veterans are being recognized and they are becoming more aware of their benefits, that there will be shrinking resources within the

Federal Government itself, and that we hope will not be a tragic irony.

We particularly look forward to the health system as maintaining the services for the women, particularly as General Holm pointed out, you have split between an aging population and a much younger population.

Now, the one issue in the couple of minutes I have left I would like to address was already referred to, and that is the question of women veterans' employment. As the Lou Harris survey pointed out, the second most mentioned type of post-separation problems were work related. That is finding work, applying or using military training in the civilian workforce and job discrimination towards women. That was a study that was a first of its kind and very much needed.

Ms. Dennis and Mr. Shasteen referred to the limited study that we did in 1985, a very limited study on the employment experiences of women veterans placed by selective public employment offices. This project examined the kinds of jobs a selected group of women veterans got through the public employment offices, and explored the effects of the military experiences of this particular group of women veterans.

We wish to commend both the Assistant Secretary of Labor for Veterans' Employment and Training and the Women's Bureau for their imagination and their commitment to the occupational well being of women veterans.

Obviously, there is a lot to be done. At least the first steps have been taken. That study has been made available to the committee. I hope it will be useful. I want to emphasize that we used a very small sample. We focused only on the women who came to the public employment office and they generally were the less skilled and the median age of the women we studied was 29.5 years of age. Again, this corroborates the younger population that we are talking about. There are a number of reasons why they are getting the low paid jobs. It could be possible that they are being channeled to them. Many of the jobs within the job service are among the lower paying jobs.

Those who have professional skills and those who are officers very often go elsewhere besides the public employment service.

I see my time is up. I just wanted to mention that and hope that further attention and more resources will be contributed toward meeting the goals of full employment for women veterans. Thank you, Mr. Chairman.

[The prepared statement of June Willenz appears at p. 126.]

Mr. Evans. Thank you. I understand you had some additional material you would like to leave with us. Without objection, the additional material will be made a part of the committee's permanent files. Thank you.

Mary, if you will go next.

STATEMENT OF MARY R. STOUT

Ms. Stout. Thank you, Mr. Chairman. I sincerely want to thank you for holding this hearing. As June stated, it was 4 years ago that the first hearings were held on women veterans and it is time to look again and I think the information that has come forth today shows that a lot of steps have been taken but there is a long way to go.

I'm very pleased that I was just recently named to the Veterans' Administration's Advisory Committee on Women Veterans. I am joining those who have left and those who are now present in continuing the efforts to make sure that the Veterans' Administration and other Federal agencies address the needs of women veterans.

Vietnam Veterans of America is proud of the leadership role we have taken in addressing the needs of women veterans and recognizing the unique contributions of women as part of the military service and veterans' community.

It was through the urging of Vietnam Veterans of America that a special project on women veterans headed by Linda Vandevaner, that Senator Daniel Inouye called for the Government Accounting Office report, actions needed to ensure that female veterans have equal access to VA benefits. VVA was also very instrumental in the congressional mandate to set up the Women Veterans' Advisory Committee at the Veterans' Administration.

This committee has made numerous recommendations to the Veterans' Administrator and has seen many of these recommendations implemented. The task of addressing the needs of the growing number of women veterans is far from over.

One of the major problems identified by the 1985 Harris study, as many have mentioned, is the lack of knowledge by women veterans of their benefits. I'm not going to go into why that experience goes on. I would like to make a recommendation, however.

We have talked about women veteran coordinators. I think it is very valuable to have them in the hospitals and certainly as part of the Advisory Committee, I will work to make sure that as the number of women veterans' patients increases, that time is set aside by those coordinators to be able to address those needs.

Some hospitals are very small. Some hospitals are in areas where there is a very small population of women veterans. That has to be monitored. I think it would be very helpful to have full time employees who are specifically targeted to outreach and education, education of women veterans as to what their benefits are, education within VA and the veterans' community about the needs of women veterans.

Vietnam Veterans of America recommends that the Veterans' Administration name full time women veterans' coordinators at all VA regional offices for a period of 2 years, charged primarily with this outreach and education. Special attention should be given to reaching women through local print and electronic media. The brochures don't go to people we don't know about them and we won't know about them unless we get into the local media.

The Veterans' Administration has built a health care system that according to the GAO report has traditionally been sized and staffed to provide care to those Service connected and non-Service connected patients. The GAO questions if the VA should size facilities to serve both categories. It's report stated that as long as it does so, it should ensure equal access to care by female veterans.

As a result of this study and the work of the Women Veterans' Advisory Committee headed by Colonel Rossi and now General

Holm, many of the most blatant forms of discrimination against women veterans have been addressed and are being corrected.

The VA is to be commended on many of the steps it has taken to provide services to women veterans. Complete physical examinations now must include breast and pelvic examinations. However, I have just received information from one veteran who had a physical examination where she did not receive a pelvic examination, and it was because it was not considered part of her disability. As a member of the Women Veterans' Advisory Committee, I am going to make sure all the women I know and can be in touch with will know that service is available and they should demand it.

Someone mentioned earlier the higher incidence of cancer among women veterans, although we are not sure these statistics are really accurate. I think there is enough information here that we should be concerned, as part of those pelvic examinations, that PAP smears always be given and that women who are eligible for medical care and want mammography have that service available.

We have one program in Minneapolis. However, it is available in many parts of the country on a fee basis.

Women who served in Vietnam both military and civilian continue to be concerned about the unresolved question of the effects of toxic herbicides. We are looking forward to the experience study of women veterans who served in Vietnam to help provide answers on this issue.

The VA Readjustment Counseling Service to the vet center program has at least from my experience been a shining example of service to women veterans. In some cases, it is very difficult to find women to come in. One of the most asked questions of me personally by vet center personnel is, where do we find them and how do we best serve them.

I've made some recommendations to do special groupings of women veterans to the vet center program. We are looking for more women to get involved; as more women know about these services, more women will use them.

I see my time is up. I would like to come to my conclusion. I think June covered the economic issues very well. I thank you for your questions on the economic issues.

I guess the bottom line to all this is the needs of women veterans will be fully met only when all veterans, the Veterans' Administration, the governmental agencies, the congressional committees and women veterans themselves, acknowledge that these are not special programs but are necessary elements in our society's obligation to care for those who have been lessened by their service to our country.

Thank you very much.

[The prepared statement of Mary Stout appears at p. 134.]

Mr. EVANS. Mr. Thorson, I think I mispronounced your name before, it's a Swedish name. I'm sorry, because I'm half Swedish.

Mr. THORSON. No, it's a Norwegian name.

Mr. EVANS. Norwegian.

Mr. THORSON. It's often mispronounced.

Mr. EVANS. That's even worse, if I offended a Norwegian.

STATEMENT OF GORDON R. THORSON

Mr. THORSON. Thank you, Mr. Chairman, for inviting the Veterans of Foreign Wars to participate in today's hearing. We must compliment you on holding this hearing to review and examine the current status of women veterans.

Our previously prepared written testimony is available to the subcommittee, and we respectively request that it be made a permanent part of the record. I will be brief and summarize our thoughts.

Back in 1983 it became increasingly apparent that women veterans were being short changed. The then administrator of Veterans' Affairs, Harry Walters, recognized the need and took action to help remedy the problem. The 18 member, Women's Advisory Committee was a product of his concern. Congress echoed this concern and passed Public Law 98-160, which made the establishment of the committee a mandate.

The committee set its guiding principle, that is, to ensure that all veterans regardless of gender receive the benefits to which each is entitled under the laws and policies administered by the Veterans' Administration.

The Women's Veterans' Advisory Committee's guiding principle should be the guiding principle of every organization; every Congressmen; and every individual claiming to represent veterans. The Advisory Committee has been very effective and achieved many positive results. Working cooperatively with the Veterans' Administration, many changes have taken place to improve health care services available for women veterans. The Advisory Committee has done a lot in a very short time. However, their work has just begun.

They must be allowed to continue to monitor, assess, and improve the gender specific programs they have been responsible for instituting.

The Veterans of Foreign Wars is pleased to continue our support of the committee, and fair and equal treatment for all veterans.

Thank you.

[The prepared statement of Gordon Thorson appears at p. 143.]

Mr. EVANS. Thank you, Mr. Thorson.

Mr. Schultz.

STATEMENT OF RICHARD F. SCHULTZ

Mr. SCHULTZ. Thank you, Mr. Chairman. I sincerely appreciate the opportunity to appear here today to discuss the concerns of women veterans.

Mr. Chairman, we have heard much here today concerning the progress which has been made in recognizing the accomplishments and the service of women veterans; and we've heard quite a bit about their needs, and the needs that have been met, and have yet to be met.

We certainly support the committee's efforts to bring forth the problems here today, and we commend the Women Veterans' Advisory Committee for their hard work and their many accomplishments. We especially are pleased with the establishment of the women veterans coordinators at the VA medical centers. We understand that they are also in place at VA regional offices. We feel that the women veterans coordinators play a large part in assisting women veterans, especially at the medical centers. And I would hope that they would continue in their efforts, and that this committee's continuing support of their efforts.

We fully recognize the needs and concerns of women veterans. And as a result of our concerns, one of our female national service officers is a member of the Veterans' Advisory Committee; and we certainly support her in her efforts. And I can tell you that the DAV will continue in our efforts to support benefits for our nation service connected veterans, especially for those disabled during time of war, whether they be men or women.

And we again thank you for the opportunity to appear here today.

[The prepared statement of Richard Schultz appears at p. 145.]

Mr. EVANS. Thank you.

Mr. Egan, if you want to go ahead.

STATEMENT OF PAUL S. EGAN

Mr. EGAN. Thank you very much, Mr. Chairman. I'm going to let Rodney S. Kirk of our Veterans' Affairs and Rehabilitation Division summarize our statement for us. But before doing that I would like to shed some light on a question that was asked by Mr. Dornan earlier in the hearing concerning the American Legion, its membership and its outreach for membership among women veterans.

Apart from anecdotal information that I could provide you with I can tell you, that like most of the other large veterans' organizations, we do solicit membership through the mail, and that solicitation is gender blind. Apart from that, I can tell you that the proportion of our membership, that are women veterans, is the same as the proportion of women veterans of wartime eras.

Mr. EVANS. Mr. Kirk.

STATEMENT OF RODNEY S. KIRK

Mr. KIRK. Thank you, Mr. Chairman, the American Legion certainly appreciates this opportunity to express to this subcommittee its views on the current status of women veterans with respect to the manner in which they are receiving medical care and other benefits in services from the VA.

Since its initial meeting in September 1983, the efforts and recommendations of the Veterans' Administration Advisory Committee on Women Veterans have resulted in substantial changes and accomplishments regarding women veterans' issues. Vast improvements are noticeable throughout the VA medical care system with respect to privacy, special personnel and equipment needs, gender related medical problems, and many, many other areas in the VA that were negligent in this regard. Overall, responsiveness of the VA in addressing committee recommendations has been both noteworthy and timely.

Mr. Chairman, our field representatives routinely check on the manner and timeliness in which VA facilities are providing health care to women veterans at all outpatient clinics and medical center surveyed. Their site visits focus on the availability of staff and equipment including those requirements for gender related conditions, as well as privacy concerns throughout the facility.

In the main, very few problems have been noted during recent surveys. However, although privacy concerns have generally subsided in the last few years, there still are some facilities at which improvements are needed to ensure both male and female adequate privacy.

To the VA's credit, many of these areas have been identified and are waiting funding for renovation to commence in 1988 and beyond.

There are also other problems that have been reported to us as existing at a specific facility or facilities that are not system-wide. One example was expressed here this morning and that would be the inability of the women veteran coordinators not being able to truly function in that capacity, because of other duties assigned them.

In addition, there are sporadic reports that GYN examinations are not being adequately performed at one facility or another. It has been and will continue to be the policy of the American Legion to investigate these matters when provided with specific details on such an incident.

The American Legion continues to stress outreach endeavors concerning women veterans. While much progress has been accomplished in this regard, we feel additional outreach efforts are needed. It is our opinion that despite vigorous outreach attempts many women veterans, for whatever reason, continue to be unfamiliar with the fact that they are entitled to benefits and medical care administered by the VA as a result of their military service.

We are confident that the VA Advisory Committee on women veterans and others will continue the momentum until as many women veterans as possible are informed and educated as to their eligibility for these benefits and services.

That concludes my statement, Mr. Chairman, and we'll be happy to respond to any questions.

[The prepared statement of the American Legion appears at p. 149.]

Mr. EVANS. Thank you all. I want to thank the panel once again. In the American Veterans' Committee study of women veterans you indicated that military service did not seem to have a positive impact on post-service employment for women. Can you give us any explanations for this?

Ms. WILLENZ. We made that observation, Mr. Chairman, because the mean wages that we found the women to be getting, the initial mean wage, were very unexpected. We really expected to see that the women veterans of comparable ages to be doing better than the non-veterans.

We can only conjecture what might be some of the reasons. One of them, as I suggested in the report, was that the women themselves, at that age, may be in a period of transition, both geographically and personally. It was noted that many of these women did not stay at these jobs very long, and moved elsewhere. Since the mean age was 29.5, we were dealing with a younger population.

Furthermore, it was also noted in our study that only four out of 10 of these women served more than 3 years. So, you had the first terms or less than first terms service. They may not have been able to really capitalize on their military training. Other reasons may come from the questions that were asked of them.

We were surprised that their military training were not brought out on the records. We did not actually interview the women; we just looked at some of the records. This is an area that needs further exploration, because one would expect that the "leg-up" that General Holm was talking about would be there.

And it may also be that there were lower paying jobs offered to them. It may be that women accept lower paying jobs, because they need them so desperately.

So, there are all kind of sociological and personal reasons that may account for this. We suggested that perhaps the Veterans' Employment Service would look at its own procedures and see whether more could be done to bring out, what the women have learned; apparently, they didn't volunteer what they knew. It was much like all labor market phenomenon, there needed to be a match between what was available and what was needed.

This is not a full answer, but one can only conjecture at this point.

Mr. EVANS. Mary Stout, has the VVA seen or have any of the women members of the VVA reported to you some of the problems that Julia Perez indicated concerning the treatment that women veterans receive at veterans' centers?

Mr. STOUT. I have heard occasion reports of that. My experience with the vet center program, however, Mr. Evans, has been that the interest is there.

Certainly, there has been a lot of training on women veterans' issues and how to outreach. We have seen some problems because the primary users, of course, in the most numbers are men. I went into a vet center and asked them to take down, what I thought was a rather offensive poster, which was done immediately. And I think sometimes we need to make people aware.

I really don't expect men to be aware of the things that might be offensive to women all the time. Sometimes they just don't think about it. And I think women have to take the step forward to say, that's offensive. Women have to take the step forward to say, I'm not being treated correctly here. And I think that's part of the education that I'm talking about with women veteran coordinators at the regional offices.

I certainly would hope that these women would be very strong. The comment about women coordinators in the hospital not having clout is something I have also heard, that they are working in what is primarily a male dominated situation where the people who are in charge of hospitals, there are I believe six hospitals that have women who are the chief medical directors, but they're basically male dominated. And this change over, this new philosophy of, care for women veterans is new to the Veterans' Administration.

Maybe I'm a little more patient than I should be. But I know that there's a lot of education that needs to go on. Mary Stremlow, who is retired from the Marine Corps and is a Deputy Director of Veterans' Services for the State of New York is here today with us.

One of the things that she said to me about World War II veterans, women, is that they felt it was their patriotic duty to serve, and it was unpatriotic to ask for services, benefits afterwards. There's a lot of education that needs to go on.

This is one thing I've heard across the board. Our generation is a little more forthcoming. Women who served in World War II come from a different generation of women, and it takes a lot to bring them out, to let them know that there are services available, and they're entitled to them. And when their needs are there, and they're entitled, they should take advantage of them.

Mr. Evans. Well, that is an interesting comment. We would hope that the women veterans of World War II realize we consider veterans benefits to be fair, we consider them as rights as we call them in the GI bill of rights.

So that probably is a perceptual problem, perhaps among elderly women veterans. I hope that we can correct this through veterans' organizations and the VA and all of us working together to overcome this problem.

Let me return again to this matter of the Small Business Administration and outreach programs. There is some matter of contention about the willingness of women veterans to get into small business. Actually, you indicated in your testimony that a significant portion of women veterans, to a greater extent than their male counterparts, had the training, skills and financial history to successfully own and operate a small business. The SBA has in fact had studies that bear this out, which found that women veterans succeeded in earning substantially more in self-employment than their non-veteran peers, once they are able to surmount the barriers to business entry.

Can you just tell us a little bit about those barriers that a woman veteran faces?

Ms. Stout. I think that it is the barriers of knowing that services are available, the Small Business Administration. Women do not tend to belong to organizations; although I am really pleased to hear the American Legion has that number of women; but women do not tend to belong to veterans' service organizations; so they do not look at themselves as veterans

So the services that are available primarily through the Small Business Administration for veterans, they do not know about. The barriers to getting in some ways women come out of the service and a lot of them are professional women who would be going into businesses; a lot of nurses, who tend to have other ways to go.

Our concern about the Small Business Administration is that we have asked on numerous occasions, for them to start doing some outreach and some pilot programs. We do not know that women will not come forth for them; their thing is they are coming to other programs that we have. I do not think the Small Business Administration knows that, either, and yet they have taken funds allocated, turned them back, and even after repeated requests, not only from our organization but from the Advisory Committee on Veterans Affairs to the Small Business Administration, have not yet done one program of outreach to women veterans.

Mr. Evans. I have other questions I would like to submit to the panel in writing, and I now yield to our minority counsel.

Mr. KINGSTON SMITH. Thank you, Mr. Chairman.

Between the statements of the witnesses and the questions you have already asked, I think that the topic has been covered very thoroughly and very effectively; and any questions we have we will submit for the record.

Mr. EVANS. All right. We will excuse this panel and that will conclude the hearing. I do want to thank the minority counsel, Kingston Smith, for staying as long as he did, and participating, as well as my staff that worked so hard: Michael Durishin, our committee counsel; Pam Parker with the committee, and Katrina Kelly, who is on my personal staff.

I want to thank you all, including General Holm and Colonel Rossi, who stayed throughout the entire proceeding, for making this, my first hearing, very much of a success.

Thank you, and the hearing is now concluded.

[Whereupon, at 12:30 p.m., the subcommittee adjourned, to reconvene at the call of the Chair.]

APPENDIX

STATEMENT OF

HONORABLE LANE EVANS, CHAIRMAN

SUBCOMMITTEE ON OVERSIGHT & INVESTIGATIONS

HEARING ON

CURRENT STATUS AND CONCERNS OF

WOMEN VETERANS

APRIL 2, 1987

WELCOME TO THE FIRST HEARING OF THE SUBCOMMITTEE ON OVERSIGHT AND INVESTIGATIONS FOR THE 100TH CONGRESS. IT HAS BEEN SAID:

> IF SAVINGS IN GOVERNMENT ARE TO BE REALIZED, OVERSIGHT IS THE KEY;
>
> IF GOVERNMENT ADMINISTRATION IS TO BE IMPROVED, OVERSIGHT IS THE KEY; AND
>
> IF SERVICES TO OUR CITIZENS ARE TO BE ENHANCED, THEN AGAIN OVERSIGHT IS THE KEY.

OVERSIGHT CAN BE USED TO ACHIEVE GREATER ECONOMY AND EFFICIENCY IN GOVERNMENT. IT CAN BE DIRECTED TOWARD ASSURING THE PROVISION OF ESSENTIAL SERVICES AND NEEDED BENEFITS. IN AN ERA OF SCARCE RESOURCES AND UNMET NEEDS, OVERSIGHT IS A POWERFUL AND IMPORTANT TOOL. IT IS A TOOL WE WILL USE CONSTRUCTIVELY AND WISELY.

WHY DO WE CONDUCT OVERSIGHT? OVERSIGHT HAS MANY PURPOSES:

IDENTIFYING WASTE, FRAUD, INEFFICIENCY, AND CORRUPTION;
QUESTIONING ARBITRARY ADMINISTRATIVE ACTIONS;
ESTABLISHING PRIORITIES;
EVALUATING GOVERNMENT PROGRAMS; AND
GAINING INFORMATION NEEDED TO MAKE INFORMED DECISIONS.

FOR THIS SUBCOMMITTEE, OVERSIGHT HAS ONE PRINCIPAL PURPOSE: TO SERVE OUR NATION'S VETERANS, THEIR SPOUSES, DEPENDENTS AND SURVIVORS.

IN RECENT YEARS, OVERSIGHT ACTIVITIES BY CONGRESS HAVE RECEIVED INCREASED RECOGNITION. CONGRESSIONAL OVERSIGHT IS NOT NEW, HOWEVER. IN FACT, OVERSIGHT BY CONGRESS IS AS OLD AS THE CONGRESS ITSELF. HISTORIANS TELL US THAT NEARLY TWO CENTURIES AGO, THE VERY 1ST CONGRESS REVIEWED ACTIONS TAKEN BY THE ADMINISTRATION OF PRESIDENT GEORGE WASHINGTON. THIS YEAR, AS WE RECOGNIZE THE BICENTENNIAL OF OUR CONSTITUTION, WE INTEND TO CONTINUE THIS IMPORTANT AND ESSENTIAL TRADITION.

TODAY OUR NATION COUNTS AMONG HER PEOPLE MORE THAN 27 MILLION VETERANS. VETERANS, SPOUSES, DEPENDENTS AND SURVIVORS COMPRISE FULLY 1/3 OF THE POPULATION OF THE UNITED STATES -- MORE THAN 79 MILLION PEOPLE.

TO SERVE THOSE WHO RECEIVE VA BENEFITS AND SERVICES, THE VETERANS ADMINISTRATION CONSISTS OF:

172 MEDICAL CENTERS,
227 OUTPATIENT CLINICS,
120 NURSING HOME CARE UNITS,
16 DOMICILIARIES,
58 REGIONAL OFFICES,
109 CEMETERIES, AND NUMEROUS OTHER FACILITIES.

THIS YEAR, MORE THAN 1.4 MILLION INPATIENTS WILL RECEIVE CARE

AND THERE WILL BE MORE THAN 20 MILLION OUTPATIENT VISITS.

MORE THAN 240,000 EMPLOYEES PROVIDE THE CARE, SERVICES, AND BENEFITS WHICH WE THINK OF AS THE VA. OUR CONCERNS ARE LARGE AND OUR EFFORT MUST BE NO LESS.

THE SUBCOMMITTEE ON OVERSIGHT AND INVESTIGATIONS HAS A UNIQUE AND CHALLENGING RESPONSIBILITY. DURING THE 100TH CONGRESS, MANY SUBJECTS IN MANY SETTINGS WILL BE CONSIDERED BY THIS SUBCOMMITTEE. THIS SUBCOMMITTEE CAN ACCOMPLISH MUCH FOR OUR NATION'S VETERANS, THEIR SPOUSES, SURVIVORS AND DEPENDENTS. WE HAVE MUCH TO DO. WE ARE EAGER TO BEGIN.

IT'S A PLEASURE TO NOW RECOGNIZE THE RANKING MINORITY MEMBER OF THE SUBCOMMITTEE, BOB STUMP OF ARIZONA. BOB IS A MEMBER OF THE ARMED SERVICES COMMITTEE AND IS REJOINING THE COMMITTEE THIS CONGRESS AFTER SERVING FOR SIX YEARS ON THE HOUSE INTELLIGENCE COMMITTEE. BOB, WELCOME BACK TO THE COMMITTEE AND A SPECIAL WELCOME AS THE RANKING MINORITY MEMBER OF OUR SUBCOMMITTEE. WE LOOK FORWARD TO YOUR CONTRIBUTIONS AND RECOGNIZE YOU FOR ANY COMMENTS YOU MAY WISH TO MAKE AT THIS TIME.

THE SUBJECT OF OUR HEARING TODAY IS WOMEN VETERANS.

AS A NATION WE LOVE STATISTICS. WE COLLECT STATISTICS ON EVERYTHING -- ALMOST. THERE ARE STATISTICS ON:

ELECTRICITY USED IN ALUMINUM SMELTING IN MAJOR PRODUCING COUNTRIES;

ESTIMATED WATER USE IN SELECTED COUNTRIES -- TOTAL, PER CAPITA, AND BY SECTOR, 1980; AND

THE WORLD CATCH OF SQUID AND THE WORLD CATCH OF ANTARCTIC KRILL, 1974-1982;

BUT BEFORE 1980, NO MAJOR SURVEY BY OUR GOVERNMENT INCLUDED EVEN A QUESTION ABOUT THE VETERAN STATUS OF WOMEN. THE CENSUS IN 1980 MARKED THE FIRST TIME THIS INFORMATION ON WOMEN VETERANS WAS SOUGHT AND COLLECTED.

THIS SINGLE FACT, PERHAPS BETTER THAN ANY OTHER, ILLUSTRATES THE REASON FOR OUR HEARING TODAY.

IN 1983, THERE WERE SEVERAL MORE IMPORTANT DEVELOPMENTS:

IN MARCH, 1983, OUR HOUSE VETERANS AFFAIRS SUBCOMMITTEE ON HOSPITALS AND HEALTH CARE CONDUCTED A HEARING ON VA HEALTH CARE FOR WOMEN VETERANS.

IN APRIL, THE VA ADMINISTRATOR ESTABLISHED AN INTERNAL ADVISORY GROUP ON WOMEN VETERANS.

ON NOVEMBER 21ST, PUBLIC LAW 98-160 WAS APPROVED. THIS ACT OF CONGRESS DIRECTED THE ADMINISTRATOR OF VETERANS AFFAIRS TO ESTABLISH THE CURRENT ADVISORY COMMITTEE ON WOMEN VETERANS AS A PERMANENT COMMITTEE. THIS ACTION ASSURED WOMEN VETERANS THAT THE COMMITTEE COULD ONLY BE ABOLISHED BY CONGRESS.

TODAY, WE WANT TO REVIEW THE RECORD ON WOMEN VETERANS.

CURRENTLY, WOMEN CONSTITUTE 4.2% OF THE TOTAL VETERAN POPULATION AND THERE ARE ESTIMATED TO BE MORE THAN 1.1 MILLION WOMEN VETERANS. WOMEN NOW COMPRISE 10.1 PERCENT OF OUR ACTIVE DUTY FORCES, HOWEVER, AND DURING THE LAST FISCAL YEAR, WOMEN ACCOUNTED FOR 12.2 PERCENT OF ACTIVE DUTY ENLISTMENTS. WHILE THE MALE VETERAN POPULATION IS DECLINING, THE NUMBER OF WOMEN VETERANS IS INCREASING.

WHAT ARE THE CURRENT STATUS AND CONCERNS OF WOMEN VETERANS?

ARE WOMEN VETERANS RECEIVING EQUITABLE ACCESS TO THE BENEFITS AND SERVICES ADMINISTERED BY THE VETERANS ADMINISTRATION AND OTHER FEDERAL AGENCIES?

ARE THE PRESENT AND ANTICIPATED FUTURE NEEDS AND CONCERNS OF WOMEN VETERANS BEING ADEQUATELY ADDRESSED?

WE WILL BE ASKING THESE QUESTIONS AND OTHERS TODAY.

WE ARE ANXIOUS TO RECEIVE THE TESTIMONY OF OUR WITNESSES. OUR FIRST WITNESS IS OUR FRIEND AND COLLEAGUE, MARCY KAPTUR. MARCY IS A MEMBER OF THE FULL COMMITTEE AND CHAIRMAN OF THE SUBCOMMITTEE ON HOUSING AND MEMORIAL AFFAIRS. THIS HEARING HAS RECEIVED STRONG SUPPORT AND ENCOURAGEMENT FROM MARCY. WE THANK YOU FOR THAT SUPPORT.

AGAIN, WELCOME AND THANK YOU FOR TESTIFYING THIS MORNING. PLEASE PROCEED.

STATEMENT OF HONORABLE BOB STUMP

BEFORE THE SUBCOMMITTEE ON
OVERSIGHT AND INVESTIGATIONS

April 2, 1987

CURRENT STATUS AND CONCERNS OF WOMEN VETERANS

THANK YOU, MR. CHAIRMAN

THE CURRENT STATUS AND CONCERNS OF WOMEN VETERANS IS AN IMPORTANT SUBJECT FOR THIS SUBCOMMITTEE TO EXAMINE, AND I COMMEND YOU FOR CALLING THIS TIMELY HEARING.

UNTIL THE EARLY EIGHTIES, I THINK IT MUST BE ACKNOWLEDGED THAT WOMEN VETERANS WERE NOT GETTING THEIR DUE FROM THE VETERANS ADMINISTRATION. THERE WERE A VARIETY OF REASONS FOR THAT, NONE OF THEM VERY GOOD, AND RATHER THAN BEAT A DEAD HORSE, I BELIEVE IT IS FAIR TO SAY THE CONSTRUCTIVE CRITICISMS HAVE BEEN HEARD AND HEEDED AT THE VA, AND MANY OF THE PROBLEMS HAVE ALREADY BEEN OR ARE CURRENTLY BEING ACTED UPON.

MR. CHAIRMAN, FROM THE EARLIEST DAYS OF OUR COUNTRY, WOMEN HAVE CONTRIBUTED TO THE NATIONAL DEFENSE IN ORDER TO PRESERVE OUR FREEDOMS. TODAY, THEY HAVE AN INDISPENSABLE ROLE IN EVERY BRANCH OF THE MILITARY SERVICES.

WE KNOW THAT IN THE FUTURE THE VA WILL BE CALLED UPON TO MEDICALLY TREAT INCREASING NUMBERS OF FEMALE VETERANS AND TO PROVIDE OTHER BENEFITS FOR THEM. THEY EARN THESE BENEFITS THROUGH THEIR MILITARY SERVICE AND ARE ENTITLED TO THE SAME BENEFITS AS MALE VETERANS. THAT'S THE LAW, AND THAT'S THE WAY IT SHOULD BE.

MR. CHAIRMAN, I LOOK FORWARD TO HEARING OUR WITNESSES THIS MORNING, AND I JOIN WITH YOU IN WELCOMING THEM. IN REVIEWING THE STATEMENTS SUBMITTED FOR THE RECORD, IT IS CLEAR THAT MORE REMAINS TO BE DONE FOR WOMEN VETERANS, BUT IT IS EQUALLY CLEAR THAT THE VA AND THE CONGRESS ARE FIRMLY COMMITTED TO PROVIDING BENEFITS FOR ALL ELIGIBLE VETERANS, WOMEN AND MEN ALIKE. OUR HEARING SHOULD TELL US WHERE WE STAND, AND WHAT REMAINS TO BE DONE.

THANK YOU, MR. CHAIRMAN.

REMARKS OF G. V. (SONNY) MONTGOMERY

I CONGRATULATE THE NEW CHAIRMAN OF THE SUBCOMMITTEE, THE HONORABLE LANE EVANS, FOR SCHEDULING THIS HEARING ON THE STATUS AND CONCERNS OF WOMEN VETERANS. MR. CHAIRMAN, THIS IS YOUR FIRST HEARING AND IT SHOWS THAT YOU ARE GIVING TOP PRIORITY TO THIS ISSUE.

I WELCOME ALL THE WITNESSES THIS MORNING AND I LOOK FORWARD TO YOUR TESTIMONY. I WANT TO PAY SPECIAL TRIBUTE TO THE WOMEN WHO SERVE ON THE ADVISORY COMMITTEE ON WOMEN VETERANS CREATED BY CONGRESS A FEW YEARS AGO. LATER ON THIS MORNING WE WILL HEAR FROM MAJOR GENERAL JEANNE HOLM AND COLONEL LORRAINE ROSSI. GENERAL HOLM NOW CHAIRS THE COMMITTEE AND COLONEL ROSSI IS THE PAST CHAIRMAN. WE HOLD THE WORK OF THE VA ADVISORY COMMITTEE ON WOMEN VETERANS IN HIGH REGARD. IN A SHORT TIME THE ADVISORY COMMITTEE HAS ACCOMPLISHED MUCH. THE FIRST TWO REPORTS TO THE CONGRESS CLEARLY SHOW THE VALUE OF THE COMMITTEE'S ACTIVITIES. KEEP UP THE GOOD WORK.

OUR CHIEF COUNSEL, MACK FLEMING, BRIEFLY ATTENDED ONE OF YOUR MEETINGS LAST WEEK AND GAVE ME A GOOD REPORT ON THE COMMITTEE'S AGENDA. IT WAS JUST WHAT I WANTED TO HEAR.

Statement of Congresswoman Marcy Kaptur
before the Subcommittee on Oversight and Investigations
on the concerns of women veterans.
April 2, 1987

Mr. Chairman,

Thank you for allowing me this opportunity to testify before your subcommittee hearing on women veterans. I commend you for holding this hearing and for highlighting the concerns of an important group of veterans who have all too often been forgotten in the development of veterans' programs and policy.

Two years ago, the Veterans Administration placed the number of women veterans at an estimated 1.2 million, or 4.1 percent of the total veteran population of over 28 million. Since coming to Congress, I have become familiar with the many difficulties these veterans have experienced in dealing with the Veterans Administration and the programs intended to assist them.

According to a VA survey of women veterans, the benefit programs most widely used by them have been the GI Bill, the guaranteed home loan program and the life insurance program. At the same time, a high percentage of these women were unaware of the availability of or their eligibility for readjustment and other psychological counseling programs, and thus their utilization of these benefits was lower. And while one out of ten women veterans has been a patient in a VA hospital, 17 percent of service-connected women veterans and 25 percent of those receiving veterans pensions believed that they were not eligible for such care. I hope that your hearing today will shed some light on why women veterans do and do not take advantage of veterans' benefits programs and how the system can be made more accessible to them.

Another matter that I know is of strong and continuing interest to women Vietnam veterans is the issue of their exposure to Agent Orange and the long, drawn-out battle with the Veterans Administration in having them included in the Center for Disease Control's epidemiological studies of Vietnam veterans and their exposure to such defoliants. Your support was crucial to the enactment of legislation in the 99th Congress to require the VA to provide for a study on the health effects of the Vietnam experience on women veterans. Unfortunately, progress on the womens' study has been hampered by controversy surrounding the original Vietnam veterans' Agent Orange study. Perhaps you and the other Members of your subcommittee, as well as the witnesses here today, can impress upon the VA the urgency of the situation and the need to proceed with these studies to alleviate the anxieties under which so many Vietnam veterans, men and women, continue to live.

Finally, I just wanted to reaffirm my support for the erection of a memorial to women veterans. I was extremely pleased when this monument was approved in the last Congress and I look forward to its dedication. Since World War I, over two million women have served and fought in the defense of this nation and it is high time they receive the attention, recognition and accolades they so richly deserve.

STATEMENT OF
JEANNE M. HOLM, USAF (RET)
VETERANS ADMINISTRATION
BEFORE THE COMMITTEE ON VETERANS' AFFAIRS
SUBCOMMITTEE ON OVERSIGHT AND INVESTIGATIONS
HOUSE OF REPRESENTATIVES
APRIL 2, 1987

Mr. Chairman, Members of the Subcommittee: I welcome the opportunity to testify on the current status and concerns of women veterans. Women veterans are grateful for the continued interest of this Committee in how well the Veterans Administration and other federal agencies are meeting their obligations to provide services and benefits to the women who have served in the armed forces. My comments will be based on the findings of the Veterans Administration Advisory Committee on Women Veterans, my own observations as a veteran and research I have done on women in the military.

The Advisory Committee on Women Veterans was created in 1983 in response to a need. Although the laws that provide benefits to those who have served in the Nation's armed forces apply equally to male and female veterans, the reality has fallen short of the objective. I think the depth of the problem can best be illustrated by the fact that until the 1980 census, the number of women veterans could only be guessed at because apparently it was not considered a matter of sufficient import.

It was a strange omission when one considers that women have been serving in the U.S. armed forces since the establishment of the Army and Navy Nurse Corps at the turn of the century. Over 13,000 served in the enlisted ranks during World War I. During World War II, more than 300,000 served as officers and enlisted personnel, 17,000 of whom served in combat theaters. Many earned combat decorations, some were prisoners of the war and some remain buried in U.S. cemeteries overseas.

Since 1948 they have made indispensable contributions to the Nation's defense as members of the career regular and reserve forces. And in the past fifteen years women have been a significant factor in the success of the all-volunteer force.

Today there are over 220,000 women in the armed forces representing over ten percent of the force and their numbers are projected to continue to increase in the coming years while the total force remains relatively constant.

Moreover, women are now so totally integrated into the armed forces all over the world that we could not go to war without them. And even though technically they are barred by law or service policy from most combat positions as well as certain combat units, combat aircraft and Navy combat ships, they will otherwise be subject to the risks inherent in military service. Thousands are serving in overseas areas, aboard ships and in military aircraft where they could become casualties in the event of conflict. It is a recognized fact of military service shared by all.

Despite the long history and growing presence of women in the ranks of the military, serious interest in women as veterans did not surface until after the results of the 1980 census were known. It was then discovered that there were 1,158,900 living women veterans representing 4.1 percent of the veteran population. Today they constitute the fastest growing segment of the veteran population.

In 1982, in response to a request from Senator Daniel K. Inouye, the General Accounting Office (GAO) conducted an investigation of the Veterans Administration's treatment of women veterans. The GAO found what most women who had served in the military already knew... that women had long been generally ignored and shortchanged by the very federal agency whose mission it was to serve all of America's veterans.

The GAO reported that the VA had not adequately focused on the needs of women veterans and pointed out that women have some unique needs, particularly medical, that must be addressed. Specifically, action was needed to insure that:

- o men and women have equal access to VA treatment programs and medical facilities,
- o women treated in VA facilities receive complete physical examinations,
- o needed gynecological care is provided,
- o sufficient plans are made for the anticipated increase in female veterans, and
- o female veterans are adequately informed of their benefits.

In April 1983, in response to rising criticism of the VA's treatment of women, the then newly appointed Administrator of Veterans Affairs, Harry N. Walters, established the Advisory Committee on Women Veterans. Initially it was intended to be an internal VA advisory group but, following the first meeting, which was held in September 1983, the Committee was mandated by Congress (PL 98-160).

The Committee members are veterans, current members of the armed forces and/or individuals actively involved in veterans' affairs. They bring firsthand knowledge of most of the issues and problems of women veterans. In addition to participating in the Committee meetings twice a year the members, on their own time and at their expense, visit VA activities in the field, participate in outreach programs and interact with women veterans.

The Advisory Committee has published two reports: the first dated July 1984 and the second July 1986. Copies have been furnished to the Subcommittee. The next report is due in 1988. Our reports accurately reflect the findings of the Advisory Committee. We believe that most, if not all, of the issues and concerns of woman veterans have been identified and are being addressed with varying degrees of success, by the agencies responsible for veterans' programs.

I shall not attempt today to cover all of the issues but will highlight a few of the more significant ones and briefly discuss some of the efforts taken to resolve them.

It is not the objective of the Advisory Committee to obtain special or preferred treatment of women veterans but to insure that all veterans, regardless of gender, receive the benefits to which each is entitled under the laws and policies administrated by the Veterans Administration. Now this is not as simple as it might seem because, while the laws apply equally to male and female veterans their needs are not always identical. Also, the demographics of the male/female veteran populations differ in significant respects that impact on VA services.

In the beginning we found that the VA had very little data on women that might serve as basis for determining their needs, for evaluating the effectiveness of services and for future planning. Extensive data have since been collected. VA reports have been expanded, where necessary, to break out information on the female population and studies have been conducted in specific areas. Also, additional data have been collected through a separate survey of female veterans conducted in 1985 under contract with Louis Harris and Associates.

These new data reveal some striking differences between the female and male veteran populations -- differences that must be taken into account in future VA planning. Probably the most striking observation is that, women constitute a growing segment of the veteran population while the male population is declining as deaths surpass new male accessions into the veteran ranks. These trends directly reflect the dramatic changes that have taken place in the male/female mix of the all-volunteer military (AVF).

Another important difference in the male/female veteran populations is that the male population shows pronounced peaks reflecting wartime build-ups for World War II, Korea and Vietnam and a pronounced decline in young veterans since the advent of the AVF. The female demographics reveal quite a different picture with a large proportion of World War II veterans and a large and rapidly expanding population of post-Vietnam women veterans. This means that, compared to the overall veteran population, the female population is disproportionately elderly and very young. The kinds of demands these two groups make on VA services and benefits, particularly in health care, are vastly different.

One of the most pressing problems pointed out by the GAO was that women veterans were not adequately informed of their benefits. This problem had deep roots in the traditional mindset of the VA that it existed chiefly to service male veterans. Most VA publications, studies and attitudes projected this bias. Also, there has been historical reluctance on the part of women who served in the armed forces to proclaim their veteran status. This was partly because, until recently, military service for women was not accorded the same public approval routinely accorded to men who had served their country and partly because of the negative attitudes on the part of VA personnel they may have encountered. Moreover, women usually found that VA medical facilities were not equipped to provide for them, thus reinforcing their own feelings of not being fullfledged veterans in their own right.

The challenge for the VA has been to turn this situation around by re-educating and sensitizing the organization and by a comprehensive outreach program to women veterans informing them of their rights and encouraging them to use their entitlements. The response to this dual challenge has been straight forward and aggressive. Women Veterans Recognition Weeks have been proclaimed by the President. Public service announcements, posters, displays and media events have been used to publicize the theme that "Women Are Veterans Too". Women are featured in VA publications and all official directives have been reviewed and, where appropriate, revised to include references to women. A new brochure designed specifically for women veterans has been published and distributed.

VA hospitals are conducting local outreach programs where women veterans are invited to participate in day-long programs covering eligibility, health care and other benefits for women veterans. Members of the Advisory Committee have participated in these programs and report that many of the women who attend have never before considered using VA services. They had considered VA hospitals as a place for male veterans with no facilities for or interest in women. Most were pleasantly surprised at the reception they received.

The national veterans organizations have contributed enormously by lending their support to forming the Advisory Committee, by helping to identify the problems and by actively reaching out to women veterans. They are providing assistance to women in need and conducting training programs within their organizations on women veteran issues. They have published and distributed informational materials and in general sensitized their memberships to the fact that women are veterans too. The

Non Commissioned Officers Association and the American Legion have produced and distributed "WOMEN ARE VETERANS TOO" bumper stickers. The veterans organizations are also providing valuable VA watch-dog services. For example, the American Legion, in their VA medical center and clinic site visit reports include information on the quality and timely care of women veterans. The AMVETS, in their annual training for VA hospital volunteers include a seminar on hospitalized women veterans' special needs. The Disabled Veterans of America has actively encouraged women veterans to become involved in the National Veterans Service Officer Program and, to our knowledge, currently employs more women veterans in this capacity than any other national organization.

The women's veteran organizations, such as the WAC Veterans Association, the WASPS, the Women Marines and Navy women have all been active in informing their membership of their entitlements.

In the crucial area of health care the Advisory Committee is especially pleased with the rapid strides made by the VA. All hospitals, nursing home care units and outpatient clinics now serve women. The level of care varies from minimum to full services but it is improving across the board. However, of the 16 domiciliaries, 14 currently accept women. We look forward to further progress in this area.

Today VA directives mandate that a complete physical examination must include breast and pelvic examinations. Female veterans must be able to receive ambulatory care for gender-related ailments. Each VA medical facility must provide outpatient gynecological services by at least one mechanism in addition to fee based care.

Improvements in services to women veterans has been reflected in a noticeable drop in the number of complaints. One reason for this drop may be the presence of Women Veteran

Coordinators. At the Advisory Committee's recommendation the medical director at each medical facility has appointed a coordinator for women veterans to act as a liaison to insure proper care and treatment for women patients. The Department of Veterans Benefits, on its own initiative, has also appointed Women Veterans Coordinators in its regional offices.

Although significant progress is being made, health care remains the most important ongoing concern of the Advisory Committee. The inability to fully accomodate to the privacy needs of the women has still not been fully resolved. Although there have been considerable improvements, it still presents problems. The Advisory Committee are concerned that budget constraints and competing priorities not foreclose on what needs to be done. Also, breast cancer is a serious health problem for women veterans. The Minnesota VA Medical Center has designed a mammography test program to aid in the detection of breast cancer. We feel that support should be given in the future to this pilot program.

In the area of health care the impact of aging women veterans looms large in the future. It is estimated that one in five female veterans is at least 65 years of age as compared to only 14 percent of the male veterans. The cohort of women age 75 and over is projected to grow unabated until the turn of the century when there will be some 260,000 women in this oldest age group. These women are less likely than the men to have family support systems... living spouses and children... to assist in their care. They are also less likely to have had fulltime employment since leaving the military but if they have been employed their incomes, on the average, will have been at a substantially lower level than the male veteran. All of this translates into future demands on VA health care facilities, especially nursing home care, domiciliaries and treatment for diseases that afflict elderly women, notably osteoporosis and alzheimer's.

Service in South Vietnam presents a different set of concerns. There are no accurate data on the exact number of women who served in South Vietnam during the American involvement there. My own research indicates that roughly 7,500 were assigned in the area of Vietnam, Thailand and off-shore on hospital ships. Many of them returned with combat decorations, some with wounds inflicted by the enemy, others with phychological wounds inflicted by dealing fisthand with the horrors wrought by modern warfare. Eight are listed on the Vietnam Memorial here in the Nation's Capitol. By far the largest number who served in Vietnam itself were Army nurses.

Concerns about health problems stemming from duty in Vietnam such as exposure to Agent Orange and Post Traumatic Stress Disorder are essentially the same for male and female veterans. The Advisory Committee found that women veterans had been routinely excluded from studies conducted by the VA, the Centers for Disease Control and other agencies. We also found a general lack of awareness or concern about the effects on women of their experiences in the combat theater.

We believe that the VA should address the war experience of the women who served in Vietnam, specifically the physical and phychological effects of Agent Orange and Post Traumatic Stress Disorder. We are pleased that the National Vietnam Veteran Readjustment Study includes women. We strongly supported the Consolidated Omnibus Budget Reconciliation Act that mandated a study of women Vietnam veterans. It is our understanding that the protocol is being developed and that the study should be under way next year.

Perhaps the most immediate need of most men and women leaving active duty is for assistance in finding employment. The 1985 Harris survey of women veterans reported that, although half of all women veterans are currently employed either full or part time, nearly one in ten report that they are unemployed but looking for work. The survey shows that unemployment or underemployment are significant problems for young women veterans. The reported rate for unemployment for women veterans age 18-24 is twenty-seven percent; for the 25-34 age group it is eleven percent.

The Bureau of Labor Statistics of the Department of Labor began collecting employment data on women veterans in 1986. However, it will be years before the data base is large enough to be reliable. Until more information are available there is simply no way of determining the employment status and unique needs of women veterans.

The VA and the Department of Labor are working together in promoting employment of women veterans. The agreement between these two agencies specifies that the VA and Women's Bureau will consult and coordinate to identify issues of concern to female veterans and develop strategies to address these needs. We would hope to see this degree of cooperation extended down to the state and local levels.

The Veterans Job Training Act of 1983 was intended to provide permanent employment for Vietnam era and Korean War veterans and certain disabled veterans who have been unemployed for long periods of time. The program has helped many veterans re-enter the job market. So far the data collected on this program indicate that only one percent of women veterans have availed themselves of this opportunity for job assistance and we don't know why. Part of the reason may be traced to the fact that women leaving the services are generally better educated and have skills that make them more readily employable in the job market. Also, fewer women than men leave the service with service connected disabilities. I suspect that the real reason is they are not as aware of this program as they should be. This is a problem that the VA, in concert with the Veterans Employment and Training Service at the Department of Labor will have to address.

Additionally, in order to receive maximum benefit from the Veterans Job Training Act programs, the population of veterans eligible to train under the law must be expanded to include all honorably discharged veterans. The increasing number of women who are serving or who have served since the end of the Vietnam era make the program expansion a must if we are to fully utilize the skills and training of today's women veterans.

The Advisory Committee are impressed with the level of cooperation that exists between the various federal agencies in the area of veterans employment. We believe, however, the efforts to improve women's employment could be enhanced by having a woman veterans advocate accompany the VA representative to all meetings of the Labor Department's Advisory Committee on Veterans Employment. We have also recommended that a joint VA, DOL, DOD and OPM study group be established to discuss strategies to encourage the participation of women veterans in federal employment. The VA has reacted positively to these proposals.

The Advisory Committee have no desire to take credit for the actions that have been taken to improve the delivery of services to the woman veteran. Our role has been that of a catalyst within the VA and with other federal agencies. We believe that the major issues and problems have been identified. We are satisfied that the agencies responsible are responding to what needs to be done to insure that the woman veteran receives the benefits to which she is entitled under the law. We are especially gratified with the positive response of the VA at all levels of the organization. That is not to say that all of the problems have been resolved... obviously they have not. But under the leadership of Administrator Thomas Turnage and with the continued interest of the congressional oversight committees we remain optimistic about the future.

I can assure you that the Advisory Committee will continue to call the shots as we see them and will not be satisfied until women veterans receive equitable treatment. We thank you for your interest and support for all of America's veterans.

That concludes my remarks. I shall be pleased to respond to your questions.

Testimony of Julia E. Perez to the Subcommittee on Oversight and Investigation, COMMITTEE ON VETERANS' AFFAIRS

Mr. Chairman and Members of the Subcommittee on Oversight and Investigations of the Committee on Veterans' Affairs:

Thank you for affording me the opportunity to address Congress on the issue of women in the military and women veterans.

My name is Julia E. Perez. I live at 47 Lopez Street, Cambridge, Massachusetts. I am the director of the Office of Veterans Affairs at the University of Massachusetts at Boston and the coordinator of the Women's Veterans Project of the William Joiner Center for the Study of War and Social Consequences. I am a veteran of the United States' Army, having served in 1958 and 1959.

One of the relatively untouched areas of study has been the place of women in the military, and in the veterans population. In November 1985 the William Joiner Center for the Study of War and Social Consequences at the University of Massachusetts at Boston sponsored the First National Working Conference on Women Veterans.

The conference was an attempt to bring women veterans together and to address the issues that affected them as veterans. Topics on the agenda included: sexism, health, VA benefits, post-traumatic stress disorder, minority women in the military, and related issues. The planning committee consisted of three women and two men. All the members of the planning committee were veterans.

Eighty-five to 100 women attended the two-day conference. They came from Alabama, Washington State, Georgia, Vermont, Connecticut, Massachusetts, Rhode Island, and Maine. They represented all branches of the Armed Forces and all the military eras from World War II to the present. Among those women who served in Vietnam were also "civilian veterans" – nurses and other civilian women who were in war zones but have never been officially acknowledged as having served their country.

The majority of the women had never met before attending the conference. By the end of the two days it became clear that 90% of the women felt disappointment and a strong sense of betrayal at the treatment they received while in the Armed Services and as veterans. It was agreed by the participants at the conference that, although the Veterans Administration and some of the service agencies have made efforts to be more inclusive of women veterans, the effort has not been adequate because these organizations are extremely male-oriented and are not educated sufficiently about issues affecting women veterans.

An outgrowth of the conference was a video documentary, The Invisible Force: Women in the Military, which explores the issues of women veterans and the services available to them. In 1986-87, the year following the conference, we began receiving calls and written requests from women veterans who had heard by word of mouth that the Joiner Center had instituted a Women's Veterans Project. These requests covered everything from questions on benefits to horror stories about the treatment received at governmental institutions.

We also received numerous requests from academic institutions, women's studies programs, and various programs which previously have exhibited little or no interest in the history of women in the military and as veterans. We have been asked to give workshops that will provide information as to how women served.

Another group of women veterans who feel the "official neglect" and remain largely invisible in our society are minority women who served and had to deal with the racist as well as sexist behavior of their government and their peers. Among those are women who served in segregated units in World War II.

The one reference to a nurse in Platoon, the most popular film of the year on Vietnam, is of the sexual function she will perform when the wounded man gets back to his unit. Similarly, in the television show M*A*S*H the nurse, who excelled as a nurse during the Korean conflict, was known more for her sexual activities. This continues to be an insult to those women who serve.

Many of the women at the conference said they wouldn't use VA facilities for the following reasons:

* services at the VA are poor;
* doctors do not know how to deal with women;
* VA facilities have a poor reputation;
* some VA facilities are in dangerous parts of town;
* VA centers are male oriented.

On a personal note, in the spring of 1986 I went to a meeting at the VA clinic on Court Street in Boston. While waiting, I overheard the receptionist and two clinical workers say they felt that the Japanese ambassador was right in saying that minorities were bringing down the standing of this country. As a woman of color, I was greatly offended.

While the appointment of women veterans coordinators at VA facilities has been a step toward addressing the problem, the step has been halting and inadequate. The women veterans coordinators are usually overworked and, according to Carol Rooke, former women veterans coordinator at the VA's Court Street Outpatient Clinic, do not get enough time or money to devote to women veterans. The VA creates the job but makes few provisions for them to do what is necessary.

Much is needed if the inequities are to be addressed. Most importantly, there must be recognition – recognition of the large number of women veterans and of the contributions they have made to this country. They have a right to excellent health care across the range of medical services. Provisions should also be made for aging female veterans, who risk feeling ignored, alienated and forgotten by the government they served. To accomplish these goals, full-time women veterans coordinators should be hired for VA facilities. Preferably, they should be veterans.

Since the number of women veterans is inexact, a full-scale effort should be undertaken to determine the number of women veterans in the United States, including a demographic analysis of the women veterans population.

A lack of sensitivity on the part of the Veterans Administration, both institutional and interpersonal, keeps women from seeking medical services. This insensitivity relates to issues of gender, culture and race. Language should be non-sexist, and increased sensitivity to cultural and racist issues is a necessity. Better training for staff about the concerns of women veterans would be a significant step.

The invisibility also extends to women who served in war zones and whose health has been affected. Legislation should include these women.

Specifically regarding health, a study of all civilian and military women who served in Vietnam should be undertaken, focusing on reproductive functions and the relationship of exposure to dioxin to stillbirths and birth defects.

In addition to a strong commitment to serving women veterans and meeting their health needs, the VA should develop reasonable goals and methods to monitor the progress of the effort. For example, outreach measures could be evaluated in six-month intervals.

At this time the services the government provides to the women who served it are inadequate and function to keep them invisible and unappreciated.

The government's intensified efforts to recruit women to serve in the Armed Forces will inevitably lead to an increase in the number of women veterans and the future demand on the resources of the Veterans Administration facilities. Any initiatives undertaken now will not only serve to redress the inequities which currently exist for women veterans but also will save the government major headaches in the future.

LINDA SPOONSTER SCHWARTZ, RN, MSN
MAJOR, U.S. AIR FORCE RETIRED

Mr. Chairman, I am Linda Schwartz and I was recently retired from the United States Air Force Nurse Corps after 16 years of military service because of injuries I received in an aircraft accident. I am also a member of Connecticut Governor William O'Neill's Task Force on Women Veterans and the Regional Coordinator for the Vietnam Women's Memorial Project. I wish to thank the Committee for this opportunity to offer information I have obtained through my personal experiences as a disabled veteran and my volunteer activities on behalf of women veterans. Specifically, I wish to address attitudes toward women veterans, health care issues in the VA system and eligibility for VA benefits.

ATTITUDES TOWARD WOMEN VETERANS

Despite the fact that the Veterans Administration has made an attempt in the past few years to increase and improve its services to women veterans, there is a woeful lack of recognition for America's 1.1 million women veterans of military service. Perhaps the best evidence of this fact is the noticeable absence of any monuments to women veterans, even in our nation's capital. In fact, any present efforts to honor women have come from the women themselves and not the government they served. Although Congress, after much debate, endorsed the creation of a monument honoring women veterans, there was no provision to fund the project. Women of the Vietnam Era have had to form their own organization to solicit funds to raise a statue to honor the 260,000 military and thousands of civilian women who served with the military during a time when men deserted the nation rather than serve their country. One only needs to look at the low priority, lack of funding and resistance to these projects to realize that attitudes toward women veterans are not equitable with their contributions to this nation.

Printing posters for the walls of VA facilities, bumper stickers announcing "Women are Veterans, Too" and Advisory Committee reports are not going to reverse an 85-year-old trend of neglect, disregard and ingratitude. If we are to believe that the interest in women veterans is more than a passing fancy, there must be a program of "Outreach Through Recognition."

The concept of "Outreach Through Recognition" is the principle reason for the success of the Vietnam Women's Memorial Project. We have become an ever-expanding network of women who served in and with the military during Vietnam. The idea of erecting a statue to commemorate our service has prompted former officer, enlisted and civilian women to work together for the realization of that goal. For many women, the project has given them the strength to break years of silence and the courage to say for the first time that they are veterans. The importance of a tangible form of recognition should not be underestimated. Public recognition for women veterans can't be a one-shot deal, it must become an American tradition! The heroism, sacrifices and valiant efforts of women veterans has and always will be one of the greatest strengths of any military initiative.

One of the most difficult problems noted by the VA Advisory Committee on Women Veterans and experienced by the Connecticut Women Veterans Task Force was identifying women veterans. In Connecticut, we knew there were 16,000 women veterans who claimed state property tax exemptions. In our investigations, we learned that VA officials were unable to obtain access to these state files to contact the women about their VA entitlements. This is quite a self-defeating practice which needs to be addressed for all parties concerned.

A joint effort on the part of federal and state agencies is essential to any successful attempt to identify and inform women veterans of their eligibility and services available. In Connecticut, we found that state expenditures on veterans ranked eighth in the nation and average federal expenditures for Connecticut veterans was ranked as fiftieth in the nation. The disparity in the ranking indicated that Connecticut veterans were not availing themselves of their federal benefits. Joint efforts by federal and state agencies would improve the cost effectiveness of both programs, improve the quality of the services to the veteran and insure that all veterans receive the benefits the citizens of this nation intended for them.

Involving congressional representatives in the process would enhance any efforts at outreach. Congressmen often communicate with each household in their district and sponsor informational sessions on VA programs. Certainly the same approach could be used to contact and inform women veterans and their families. Women veteran appreciation days sponsored by VA facilities would be another approach to attracting public attention, increasing recognition and making contacts with women veterans.

VA Benefits and Women Veterans

A very essential aspect in the entire question of women and the VA begins in the transition from military to civilian life. I have consistently heard women, even from the post-Vietnam era, say they had no idea of the importance of documentation of injuries, illness and exposure to noxious substances would later have on their health and attempts to obtain VA entitlements. In my own case, when I was released from active duty in 1976, I did not have a separation physical nor was I informed of any VA benefits. My briefing consisted of a statement by the clerk that if I ever became ill and couldn't afford care I could go to the VA for treatment. That was the thinking in 1976. The policies of the VA have changed considerably and created an entirely different set of treatment priorities. There should be a mandatory briefing by the VA of all military members at the time of their separation or retirement from the service. Most recently, the injuries I received in 1983 illustrate the attitudes that women still encounter today.

In 1983, while assigned as a Senior Flight Nurse on a U.S. Air Force Reserve training mission, a hatch blew off the aircraft, causing a rapid decompression. Although I was able to function in the emergency, the next day I could not remember my own telephone number, or the name of the President. I had no sensation on my left side and was in danger of losing the sight of my left eye. I had decompression sickness of the Central Nervous System, especially the right hemisphere of the brain. I was initially treated for the decompression sickness but the residual deficits, especially the inability to see, pain, and fatigue persisted. Eventually, I prevailed on the Air Force to provide some care for my injuries. I soon learned it would have been better if I had died in the accident than to have to endure the humiliation and absurdities of my "treatment" by the Air Force.

After six weeks at Andrews Air Force Base Hospital, the doctors told me that I had Organic Brain Syndrome, mild dementia because of the injury to my brain. They told me that I could never return to nursing or my graduate studies at the Yale School of Nursing. They told me to go home, "bake bread and thank God I had a husband to take care of me." The Air Force Physical Evaluation Board officially determined my problems were from a car accident I had been in when I was six years old. They would not be responsible for my care.

After sixteen years of military service, attaining the rank of Major, being accepted into graduate school at Yale my loss of memory, loss of sensation, and pain was due to a car accident thirty-three years before? The outrageous situation of having to battle a system that had promised to care for me was aggravated by the fact that I was too disabled to adequately defend myself. The entire experience was too traumatic, demoralizing and overwhelming for me to even think of attempting to correct the injustice. The situation wasn't resolved until three and a half years later. It is not an isolated incident.

The attitude that women veterans don't need the VA because they have husbands to take care of them is as prevalent today as it was before women were officially accorded veteran status. Women, who have become seriously ill, injuried in the line of duty, exposed to toxic materials or psychologically maimed during their military service, are unable to obtain VA assistance because of inadequate documentation, lack of knowledge or misinformation about the process. To begin with, it is extremely unfortunate to incur any health problems but it is doubly degrading to have to beg the government to assume its legal responsibilities for care.

Health Care in the VA System

Should a woman succeed in qualifying for services at a VA hospital, the question of the quality of that care remains. Despite the fact that the VA Advisory Committee on Women Veterans 1984 report made specific recommendations to improve the quality of services, there has been very little progress to the actual implementation. In the Connecticut Women Veterans Task Force visits to VA facilities we found that breast and pelvic examinations and pap smears are still not being routinely done on women during physicals. This is extremely irresponsible given the evidence in the 1984 Louis Harris Poll which found the lifetime incidence of cancer in women veterans is nearly twice as high as that of the general population of adult women. Besides being poor health practice, this omission endangers the health of women veterans. The use of Nurse Practitioners or Certified Nurse Midwives for gynecological care would be a cost effective measure to insure adequate and appropriate health screening.

The recommendation to appoint women veteran coordinators and form advisory groups on women veterans is not as widely supported as it needs to be. In some hospitals, conscientious coordinators make concerted efforts to improve services, heighten staff awareness, and promote outreach for women veterans. There are other reports that the appointment as coordinator is given as an additional duty with no clout to an already overworked secretary or woman administrator. Advisory groups can meet on a monthly basis or as little as once a year to review the policies toward women or assist women to obtain care. It is often a question of filling the square rather than filling the need.

Recent studies of the women of the Vietnam era present new data that indicate the major issue confronting this generation is delayed stress syndrome. Studies by the Army have also found that Post-Traumatic Syndrome is not only limited to women who served "In Country." There is evidence that nurses who cared for battle casualties in Japan, the Philippines and stateside hospitals also experience the symptoms of Post-Traumatic Stress Disorder/Delayed Stress Syndrome. However, in some areas of the country these veterans have been unable to receive counseling assistance from the VA. It is important to say that these women do not feel comfortable in Vietnam Vet Centers or group therapy with men and have sought more individualized care. However, such requests are not extraordinary given the very personal nature of these women's memories. Women experienced the Vietnam War on a very different level than did the combat soldier. Some of their traumatic memories are too painful to disclose in the company of men. They have purposefully avoided counseling at vet centers for these reasons.

Studies of the health problems of "In Country" women vets reveal that the residual effects of exposure to toxic chemicals may have tainted a newer generation of America - their children. A recent study by Sharon Rice-Grant, MSW, at California State University found that women who served in Vietnam had higher rates of miscarriages and stillbirths (30%) and their children had more prevalence of birth defects. Both rates are significantly higher than the rate of birth defects reported by the Center for Environmental Health. The study also found significantly higher numbers of major health problems, soft tissue cancers, chronic pain, memory and psychiatric problems in these women. The significance of this data indicates that it was no accident that these health problems are linked with the exposure to toxic chemicals.

Since the beginning of the Agent Orange controversy, the exclusion from studies and minimization of the exposure of women to these toxins is a glaring example of the double standard and double jeopardy women in the military must endure. Agent Orange cannot be left for historical analysis or retrospective studies. The existing evidence demands the attention of Congress to explore the entire issue. This nation has a responsibility to know, all Vietnam veterans have a need to know, and their children have a right to know the real effects these poisons have on health. The technology that spawned this tragedy can also answer these questions.

This Committee must give serious consideration to funding adequate scientific research of the effects of Agent Orange .

Summary

The founding of the Army Nurse Corps in 1901 was the first time women were officially recognized as part of the military. Since that time, women have willingly volunteered for military service in times of peace and war. They have done so out of a sense of duty, patriotism, and pride. The idealistic values which motivated women to join the military are often the exact opposite of the treatment they receive. Defending the country, preserving freedom, and serving humanity influenced them to enter a system that does not recognize individuality, basic rights or freedoms. Today, there is as much evidence of discrimination, sexual harassment and violence against women in the military as there was forty-five years ago. The problems of women veterans begin in the military. It is left for the Veterans Administration to rectify the residual effects of that military system.

Most women do not have the wherewithal to negotiate the bureaucratic maze to establish the service connection with their health problems. Unfortunately, that does not alleviate the health problems or disabilities nor should it negate the Veterans Administration's responsibilities to care for them. The present efforts at Outreach to Women Veterans has been so limited it has also become "America's Best Kept Secret ." One can only wonder at a program of outreach that has yet to make it out of government channels to the public.

The problems identified by the VA Advisory Committee on Women Veterans and the 1984 Louis Harris Poll have not been adequately addressed to have any effect on the treatment or services to women veterans. It is especially disheartening to learn that the Advisory Committee is working on the problem of supplies in VA canteens. There are greater needs when we see that women veterans suffer twice the incidence of cancer than the general population. There are unanswered questions about women veterans who have a higher incidence of miscarriages and stillbirths and birth defects in their children than the national average. It is time for us to put aside the extraneous issues and make serious attempts to assist women veterans with programs that will solve their problems.

At the same time Congress is considering a bill which would require nurses and other health care professionals to register with Selective Service for mobilization during a national emergency. Never in the entire history of this nation has the Congress had to conscript nurses. Despite the inequities of not being considered part of the military, or accorded veteran status or compensated for injuries, nurses have endured the discrimination, omissions and prejudices to serve the needs of this country in times of war, national emergency and peace. The suggestion that this legislation is needed is insulting to every nurse who served or continues to serve our nation. Congress would do better to invest its time and funding to improve the quality of military life, increase accessibility to veterans services and increase the recognition of those who do serve in the military.

It is increasingly clear that the women of today will not tolerate the double standards we presently see in the VA system. Nor will it attract them to military service. We must not allow the present problems to continue. Ultimately, any efforts to improve the services to women veterans will be an investment in our national defense capabilities. There are over 1,178,000 known women veterans who contributed their skills, energies and talents to the service of our country. Where would America be if these women had stayed home?

This is not a mere question of money, cosmetics in the canteen, or the availability of services. Before us is a question of honor. How does a nation honor, how does a state honor, how does an individual honor the achievements, sacrifices, and contributions of over 1.1 million of its citizens who are women veterans? These women did not give less. These women did not love our country less. These women do not deserve less.

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PREPARED STATEMENT OF JANNETTE TAPPAN, WOMEN VETERANS' COORDINATOR

The Commonwealth of Massachusetts

Executive Office of Human Services

Office of Commissioner of Veterans' Services

Leverett Saltonstall Building, Government Center

100 Cambridge Street, Boston 02202

MICHAEL S. DUKAKIS
GOVERNOR

JOHN HALACHIS
COMMISSIONER

Document To Be Delivered
To The Sub Committee On Veterans Affairs
Thursday, April 2, 1987 Chairman. Congressman Lane Evans

My name is Jannette Tappan, I am the Women Veteran's Coordinator for the Commonwealth Of Massachusetts Veterans' Services. My duties are to
act as a link between the Commissioner of Veterans' Services and the
act as a link between the Commissioner Of Veterans' Services and the Governor's and Commissioner's Advisory Committee On Women Veterans and to address the issues and concerns of women veterans in Massachusetts.

This Commission established in 1985, is comprised of 21-members appointed by Governor Dukakis and Commissioner John Halachis to identify and locate women veterans in Massachusetts, and to advise and recommend to the Governor and the Commissioner Of Veterans' Services, policy by reviewing services, and especially medical services, which may need improvement. To determine the adequacy of services now being rendered, and to make recommendations to meet these requirements.

We, in Massachusetts, feel that there is a danger and misunderstanding that veterans benefits and services are solely designed for male veterans.

We, in Veterans' Services have discovered that even most male veterans are not fully aware of their benefits...let alone women veterans.

Today, our priority and efforts are directed towards reaching over 30,000 women veterans in Massachusetts, and that is not an easy task.
Information on benefits & services to the veteran population is perhaps
Information on benefits and services to the Veteran population is perhaps one of the most crucial requirements of governmental agencies responsible for delivering these services.

What we in Veterans' Services of Massachusetts are doing to reach women veterans, Statewide, is to develop a master mailing list which will be used to disseminate information on an ongoing basis to keep women veterans constantly informed of their benefits and services provided by state and federal agencies.

In addition, plans are now underway to establish "satellite centers" for women veterans to create awareness and visibility and to open other avenues to communicate their special needs and concerns.

What we feel would be a "team approach" towards helping us reach our goals that those of the Veterans Administration, is to develop a yearly mailing
erans and inform them c .

fforts here in Massachu
Administration, than w
best job we can in the interest of our veteran population.

However, in the process, the Federal Veterans Administration must be the center of focus, and must take the initiative to bring the women veterans into our Veterans Programs which they have earned along with their male counterparts.

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Submitted by: Jannette Tappan
Jannette Tappan
Women Veteran's Coordinator

STATEMENT OF
JOHN A. GRONVALL, M.D.
CHIEF MEDICAL DIRECTOR
DEPARTMENT OF MEDICINE AND SURGERY
VETERANS ADMINISTRATION
BEFORE THE SUBCOMMITTEE ON OVERSIGHT AND INVESTIGATIONS
COMMITTEE ON VETERANS' AFFAIRS
HOUSE OF REPRESENTATIVE
APRIL 2, 1987

Mr. Chairman and Members of the Subcommittee:

I am pleased to appear before your Committee to give you a progress report on the VA's provision of benefits to women veterans.

The 1980 Census, first ever to provide reliable information on veteran status for women, revealed that there were 1.13 million women veterans making up 3.1% of the veteran population. This figure is growing and women now comprise over 4% of the veteran population. Between 1970 and 1986, the number of women discharged from VA hospitals more than doubled from 9,600 in 1970 to 21,109 in 1986 (2% of all discharges). The Survey of Female Veterans conducted by Louis Harris and Associates in 1984 under contract to the VA, showed that women veterans are better educated than the general population (only 3% do not have high school diplomas and 47% have some college) and 75% have private health insurance, perhaps accounting for the underutilization of VA health care (2% of VAMC discharges compared to 4% of the population). However, a sizable minority are medically indigent and/or have service-connected disabilities and can be expected to seek care in the VA.

In 1982 the GAO published a report that concluded that actions were needed to assure that men and women have equal access to VA treatment programs and medical facilities including action to assure that women receive complete physical exams and necessary gynecologic care. The report cited lack of privacy in some facilities and inadequacies, particularly in outpatient gynecologic care. The GAO also pointed to certain special programs such as the domiciliaries which restricted access by women. The report noted that the Readjustment Counseling Program for Veterans of the Vietnam Era was specifically addressing the needs of women.

The Department of Medicine and Surgery concurred with the recommendations of the GAO and in January 1983, a circular was published establishing criteria for adequate and equitable care of female veterans. It instructed each facility to develop a written plan for the care of women addressing at a minimum four areas:

a. Definition of a complete physical exam for women as including breast and pelvic examination.

b. Provisions for adequate inpatient gynecology services.

c. Provisions for outpatient gynecology services.

d. Referral procedures for necessary services unavailable at that facility.

As a result of the GAO recommendations, directives were issued to identify privacy problems and propose corrective action in the Five-Year Facility Plan. Construction planning criteria were reviewed and found to be consistent with appropriate privacy for males and females.

Prior to 1983, nine facilities had relied on fee-basis care only as a method of providing gynecology. Since that time, all of these added at least one other method and currently all stations provide gynecology services.

At the time of the GAO Report, only six of the 16 domiciliaries admitted women. Now all but two do. Of those two, Hampton has new construction in the final stages and they will be able to admit women to the new facility which is due to open in June 1987. West Los Angeles has a total renovation project in the planning stage and in the meantime has requested interim funding to modify a portion of the existing facility to provide adequate privacy for women. A recently activated domiciliary in Butler, Pennsylvania will be able to accommodate women veterans as will subsequently activated domiciliary programs.

The first VA Mammography Unit was opened at VAMC Minneapolis in 1984. This year six additional units are being funded at Allen Park, Buffalo, Martinez, Portland and West Roxbury. A mobile unit will also be established at Hines.

The Readjustment Counseling program has continued to monitor their services to women veterans through the Women Vietnam Veterans Working Group. Women veterans are being seen regularly in Vet Centers and at numbers slightly above the 3% of women who served during the Vietnam era. Five percent of Vet Center team leaders are women as are 14% of the counselors.

The health care needs of women veterans are being addressed in the Medical District Initiated Planning Process (MEDIPP). Medical Centers are responsible for assessing their ability to meet the current and future needs of women veterans and to initiate planning when unmet needs are identified. Program initiatives, such as special women's clinics or mammography units, as well as facility projects, to improve privacy are included in MEDIPP plans.

We do get inquiries from women concerning care for normal pregnancy and delivery. As you know, the Veterans Administration does not provide care for normal pregnancy and delivery since pregnancy is not considered to be a medical disability. There have also been a few inquiries from women concerning the availability of assistance in overcoming infertility. This concern is not unique to women since infertility may affect either males or females. However, it is not defined as a medical disability and therefore the available new technologies used to overcome infertility are not available to either men or women through the Veterans Administration. VA staff have been cooperating with staff from the Office of Technology Assessment assigned to the OTA study of Infertility Prevention and Treatment. The Department looks forward to receiving this important report when it is completed.

The VA Advisory Committee on Women Veterans, which was established in 1983, has closely monitored the progress of DM&S in meeting the needs of women in VA facilities. One specific recommendation made by the Committee was the appointment of women veteran coordinators to make the often very masculine facilities more accessible and more sensitive to the growing number of women veterans eligible for care in these facilities. The recommendation was accepted and has been well received. Many facilities have also set up a committee to assure that the various needs of women can be met and to assist in planning for future needs. Members of the Advisory Committee have been very active in outreach to inform women veterans of benefits and to increase awareness of their veteran status. Committee members actively participated in the design of the VA's new brochure entitled "Women Are Veterans, too!"

The VA Advisory Committee on Women Veterans has supported the women veterans Vietnam experience study which was mandated by P.L. 99-272. This epidemiologic study of long-term adverse health effects, particularly gender specific health effects, experienced by women who served in the Armed Forces in Vietnam is in the protocol design phase under contract with the New England Research Institute. The protocol is to be completed by July 1, 1987, and will study health effects which may have resulted from traumatic experiences, exposure to phenoxy herbicides, chemicals, medications or environmental hazards, or any other experience or exposure during Vietnam service. Approximately 7,000 women served in Vietnam.

The Department of Medicine and Surgery is committed to meeting the needs of women veterans seeking care and is anticipating that the demand will increase as the population of women veterans grows and the significant segment of women who served in World War II ages. Planning to meet their needs is an integrated part of our planning process.

Although the provision of health care has received the most attention in the Veterans Administration's efforts to better meet the needs of women veterans, the Veterans Administration provides a full range of other benefit programs which are available for women veterans. The criteria which must be met to qualify for these benefits are the same for men and women. The amount of those benefits paid monthly is also the same for similarly circumstanced women and men.

At the current time, 31,768 women receive service-connected disability compensation. These women represent 1.4% of all veterans on the compensation rolls and 2.6% of all women veterans. Comparatively nearly 8% of the male veteran population is receiving service-connected disability compensation. Disability (nonservice-connected) pension has been granted to 9,405 women veterans (1.4% of all veterans on the rolls and 0.79% of all women veterans.) Approximately 2.4% of the male veteran population is receiving disability pension.

During FY 1986, 5,546 VA guaranteed loans were closed by women veterans. This was 1.8% of the 307,747 loans closed.

VA actively seeks out female veterans through continuing outreach projects. The Department of Veterans Benefits has designated women veterans coordinators at all regional offices. Currently, the Department of Veterans Benefits is in the process of preparing to mail the VA pamphlet, "Summary of VA Benefits" to all members of the Women's Airforces Services Pilots. A display "VA Benefits for Women -- Same Service -- Same Benefits" is used reguarly at VA medical centers and state and county government centers and buildings. It is a salute to our women veterans and informs them of their benefit eligibility and how to apply for benefits.

Mr. Chairman, this concludes my formal statement. I and members of my staff will be pleased to respond to any questions that you or members of the Committee may have.

STATEMENT OF
MRS. SHIRLEY M. DENNIS
DIRECTOR OF THE WOMEN'S BUREAU
U.S. DEPARTMENT OF LABOR
BEFORE THE
SUBCOMMITTEE ON OVERSIGHT AND INVESTIGATIONS
OF THE
COMMITTEE ON VETERANS' AFFAIRS
U.S. HOUSE OF REPRESENTATIVES

APRIL 2, 1987

Mr. Chairman and Members of the Subcommittee:

I am pleased to have the opportunity to be here with you this morning and discuss employment opportunities of women veterans. First I would like to introduce my colleague from the Department of Labor, Donald E. Shasteen, Assistant Secretary for Veterans Employment and Training. As you know, Mr. Shasteen directs the major program for veterans in the Department and is an ally of the Women's Bureau in our efforts to better understand the problems and needs of women veterans. We welcome the subcommittee's interest in women veterans as well as the information and concern of the other witnesses here today.

The Women's Bureau was founded in 1920 to monitor and assist women in the labor force, or in the more formal words of the law ..."to formulate standards and policies which shall promote the welfare of wage-earning women, improve their working conditions, increase their efficiency, and advance their opportunities for profitable employment." In line with that mandate, we want to maximize opportunities for all women to prepare for and enter into jobs that will provide adequate income for themselves and their families. As a very small agency, the Women's Bureau stimulates, encourages and supports awareness of the needs and contributions of women workers throughout the agencies of the Federal government and in private industry, as they design their programs.

In this instance, we are particularly glad to have begun work with the Veterans Administration and to participate on their Advisory Committee on Women Veterans whose recommendations have repeatedly yielded results. We look forward to the continuance of this relationship in the future.

Let me share with you some of what we know about women veterans and employment. The numbers of women in the armed forces are increasing as are the numbers of women veterans. In March 1986, the Department of Defense reported that there were 215,000 women in the military, comprising approximately 10 percent of the total Armed Forces. In the post-Vietnam era (since 1975), the number of enlisted women has increased by 100,150 and the number of female officers by 17,200--or by 120 and 126 percent, respectively. Over the same period, the size of the total Armed Forces has changed little.

During 1986, the women veteran population averaged 1,030,000. (See table 1). About 55 percent of these women participated in the labor force, the same proportion as for women nonveterans. Almost 250,000 were Vietnam-era veterans, 71 percent of whom were between the ages of 30 and 39. The labor force participation rate for these veterans, almost 78 percent, was higher than that of any age group of women nonveterans. The unemployment rate among women Vietnam-era veterans averaged only about 5.3 percent. This compares with an annual average unemployment rate of 7.0 percent in the nation as a whole, and 7.1 percent for women nationwide.

About 452,000 women were veterans of other wars. These women were primarily involved in World War II and the Korean conflict and thus were mainly between the ages of 60 and 69. Because of this concentration in the older age group, the labor force participation rate for "other" war veterans is relatively low, about 31 percent.

Given the small sample of women veterans in the Current Population Survey, published by the Bureau of Labor Statistics, the new data allow for little analysis of such issues as post-service employment and unemployment experiences.

Table 1. Labor force status of women 18 years and over by veteran status, 1986 annual averages

Veteran status	Civilian non-institutional population	Civilian labor force	Labor force participation rate (%)
Total veterans.......	1,030,000	567,000	55.1
Vietnam-era veterans.	242,000	185,000	76.6
Other war veterans...	452,000	140,000	31.0
Peacetime veterans...	336,000	242,000	72.0
Nonveterans..........	93,760,000	51,846,000	55.3

Among the findings of a survey of women veterans commissioned by the Veterans Administration and conducted by Lou Harris Associates in 1985 were that women veterans are experiencing employment problems and that women are less inclined than men to take full advantage of veterans' benefits.

The Women's Bureau has been concerned about what was happening to women upon separation from the Armed Forces and, based on this concern, undertook a study on their transition from military to civilian employment. Until sponsorship of this exploratory study by the Bureau, no research had been done on women veterans' employment. The study was done in collaboration with the Assistant Secretary for Veterans Employment and Training through a contract with the American Veterans Committee (AVC.)

In view of the preliminary finding of the Harris survey and the AVC study, what have we done? First, of course, all the services available to any veteran from the Office of the Assistant Secretary for Veterans Employment and Training are available to women veterans, but some additional steps have been taken to remedy the women veterans' apparent lack of information about what services are available to them. For example, in a cooperative effort when the Veterans Administration published its excellent pamphlet "Women Are Veterans Too," the Women's Bureau arranged with the Employment and Training Administration for its distribution through the Employment Service System. It was also distributed through the Women's Bureau offices in ten regions. In October 1984 the Women's Bureau in Region III, headquartered in Philadelphia, designed and implemented an initiative to serve enlisted women who were separating from military service. Military separation centers in the region were contacted and provided with a packet of information with leaflets on occupational outlook and apprenticeship and a listing of community-based organizations to contact for assistance. This packet was designed to assist women in their search for civilian employment.

In a further effort to increase outreach to women veterans, the Women's Bureau in Region III, covering the States of Delaware, Maryland, Pennsylvania, Virginia, West Virginia, and the District of Columbia, co-sponsored a conference "Using Your Military Past to Shape Your Future." The conference was held last month at Temple University in Philadelphia.

The program featured a panel of women veterans; a workshop with Federal, State, and municipal personnel representatives who discussed using veterans' preference to obtain government employment; and a second workshop on employment issues.

In Region X, headquartered in Seattle, Washington, and covering the States of Alaska, Idaho, Oregon and Washington, another special project is underway. In the process of conducting a Vietnam-era Veterans Placement Program, the Washington State Employment Security Department's Everett Job Service Center observed that 12 percent of the participants were women veterans, compared to the 4 percent statewide women veterans population. Of the women veteran participants, 75 percent were on public assistance.

It appeared that some found it hard to relinquish public assistance benefits because of the medical coverage for their children and lack of training opportunity for jobs with pay adequate to their needs. Based upon the program experiences of the Everett Job Service Center Vietnam-era Veterans Placement Program, a proposal was presented to learn about some of the employment needs and to assist women veterans in obtaining training and employment.

In June of 1986 the Veterans Employment and Training Service and the Women's Bureau jointly funded the Women Veterans Placement Program. The program will serve 40 women veterans and hopes to place 27 percent in unsubsidized employment. Currently there are 32 enrolled. Fourteen, or 42 percent of those enrolled, have been placed at an average wage of $7.43 per hour.

Areas of training have included automotive maintenance and auto parts sale, fashion merchandising, shipping and receiving, advanced secretarial training, precision woodworking and industrial aircraft orientation. Recruitment for new enrollments has been for Airframe Maintenance Training. Job development for pending graduates from one training class is underway. Program participants also receive a ten-week course in life skills and career planning. The program maintains a support group which meets weekly for women currently enrolled. At a site visit just last week, the Regional Administrator met with project administrators and conducted a Women in Nontraditional Careers (WINC) workshop for the women veteran participants. (WINC is a curriculum-based course of instruction that points out the employment and earnings advantage of nontraditional careers. WINC combines classroom instruction and experiential learning through job exploration in the community.) The WINC workshop was presented at the Women Veterans Placement Program to assist participants in evaluating their selection of occupational training available through the program. When the program ends in December 1987, an evaluation of the project will be submitted, along with a model that can be replicated in other employment service offices throughout the country.

What does the Women's Bureau need to know about women veterans to plan more effectively for the future? Primarily, more about what their military work experiences were and whether and how those experiences impacted their civilian labor force status afterwards. We need to know more about the _why_ as well as the _what_ of their occupational choices. We are listening very intently to the women veterans with whom we have direct contact in the conference we have mentioned and particularly in the project in Washington State to learn some of these answers.

In summary, Mr. Chairman, I would say that what we have learned about women veterans is challenging. We have begun to assure that women know about the range of occupations open, the types of training required for jobs of the future, and particularly the special assistance available to them as veterans. Let me assure you that we intend to continue the efforts we have begun to make sure that our women veterans have every opportunity to benefit from the employment opportunities in America's economy.

STATEMENT OF
CURTIS J. SMITH
ASSOCIATE DIRECTOR FOR
CAREER ENTRY
OFFICE OF PERSONNEL MANAGEMENT

before the

SUBCOMMITTEE ON OVERSIGHT AND INVESTIGATIONS
COMMITTEE ON VETERANS' AFFAIRS
U.S. HOUSE OF REPRESENTATIVES

on

THE PROVISION OF BENEFITS AND SERVICES TO
WOMEN VETERANS

APRIL 2, 1987

MR. CHAIRMAN AND MEMBERS OF THE SUBCOMMITTEE:

THANK YOU FOR PROVIDING OPM THIS OPPORTUNITY TO TESTIFY ON THE PROVISION OF BENEFITS AND SERVICES TO WOMEN VETERANS.

OPM STRONGLY SUPPORTS EFFORTS TO HELP OUR NATIONS' WOMEN VETERANS. THE FEDERAL GOVERNMENT CONDUCTS A VARIETY OF EMPLOYMENT ACTIVITIES TO HELP VETERANS GAIN EMPLOYMENT AND SKILLS AS THEY MOVE INTO THE MAINSTREAM OF CIVILIAN LIFE. WE ARE PLEASED THAT THESE PROGRAMS ARE HELPING A SUBSTANTIAL NUMBER OF WOMEN VETERANS. THERE ARE NOW SOME 34,000 WOMEN VETERANS EMPLOYED THROUGHOUT THE FEDERAL GOVERNMENT IN A WIDE VARIETY OF OCCUPATIONS.

LET ME BRIEFLY OUTLINE THESE EMPLOYMENT PROGRAMS.

UNDER COMPETITIVE HIRING PROCEDURES, WOMEN VETERANS RECEIVE ESTABLISHED VETERANS PREFERENCE. FURTHER, WOMEN BENEFIT UNDER SPECIAL AUTHORITIES FOR THE NONCOMPETITIVE APPOINTMENT OF VETERANS.

THE VETERANS READJUSTMENT APPOINTMENT AUTHORITY, OR VRA, ALLOWS THE NONCOMPETITIVE APPOINTMENT OF VIETNAM ERA VETERANS TO FEDERAL JOBS, WITH CONVERSION TO CAREER OR CAREER-CONDITIONAL STATUS AFTER 2 YEARS OF SATISFACTORY TRAINING AND SERVICE. IN FISCAL YEAR 1985, OVER 1,300 WOMEN VETERANS GAINED FEDERAL JOBS THROUGH THE VRA PROGRAM. SINCE THE VRA PROGRAM WAS CREATED IN 1970, OVER 20,000 WOMEN

VETERANS HAVE BENEFITED BY RECEIVING THESE APPOINTMENTS. THIS REPRESENTS 9 PERCENT OF ALL VRA APPOINTMENTS, WHICH EXCEEDS THE 4 PERCENT THAT WOMEN COMPRISE OF THE TOTAL VETERAN POPULATION IN THE NATION. THE FEDERAL GOVERNMENT HAS BENEFITED FROM VRA HIRING AS WELL, THROUGH THE HIGH RETENTION RATE OF THESE EMPLOYEES.

OPM TAKES A VARIETY OF STEPS TO ENCOURAGE THE USE OF THIS SUCCESSFUL PROGRAM, INCLUDING PUBLICIZING THE PROGRAM, DISTRIBUTING JOB INFORMATION TO POTENTIAL EMPLOYEES, COOPERATING WITH THE VA AND THE DEPARTMENT OF LABOR, AND TRAINING AGENCY PERSONNEL INVOLVED IN USING THE PROGRAM. FURTHER, OPM LAST YEAR SUPPORTED EXTENSION OF THE VRA FOR 3 YEARS THROUGH 1989.

OF THE 34,000 WOMEN VETERANS EMPLOYED BY THE FEDERAL GOVERNMENT, OVER 2,800 ARE DISABLED. UNDER THE DISABLED VETERANS AFFIRMATIVE ACTION PROGRAM, OR DVAAP, OPM ACTIVELY HELPS AGENCIES DEVELOP AND IMPLEMENT PROGRAMS TO IMPROVE THE EMPLOYMENT AND JOB ADVANCEMENT OF DISABLED VETERANS.

VETERANS WHO ARE 30 PERCENT OR MORE DISABLED CAN BE HIRED UNDER A SPECIAL AUTHORITY ON A NONCOMPETITIVE BASIS. IN FISCAL YEAR 1985, OVER 200 WOMEN VETERANS WERE APPOINTED UNDER THIS AUTHORITY. THE FEDERAL GOVERNMENT NOW EMPLOYS OVER 900 WOMEN VETERANS WHO ARE 30 PERCENT OR MORE DISABLED.

IN SUM, WE BELIEVE THESE PROGRAMS, AS PART OF THE ADMINISTRATION'S STRONG COMMITMENT TO VETERANS, ARE WORKING EFFECTIVELY TO HELP WOMEN VETERANS. IN THE FUTURE WE WILL CONTINUE OUR POSITIVE EFFORTS TO PROVIDE WOMEN VETERANS THE GREATEST HELP THAT WE CAN, AS THEY DESERVE.

THANK YOU. I WOULD BE PLEASED TO ANSWER ANY QUESTIONS YOU MAY HAVE.

STATEMENT OF
DICK E. ELLIS
DIRECTOR, OFFICE OF VETERANS AFFAIRS
SMALL BUSINESS ADMINISTRATION
BEFORE THE
HOUSE VETERAN'S AFFAIRS COMMITTEE
SUBCOMMITTEE ON OVERSIGHT AND INVESTIGATIONS

THURSDAY, APRIL 2, 1987

Mr. Chairman and Members of the Subcommittee:

Thank you for affording me the opportunity to discuss the Small Business Administration's (SBA) Veterans Program with you, specifically as it affects the many women who have honorable served in the Armed Services of the United States.

In 1974, the Congress mandated that the SBA provide special consideration for veterans in its programs. The SBA has worked closely with the Congress, the National Veteran Organizations and many veterans who are volunteers to define and implement a meaningful program for veterans.

Therefore, since then SBA has had in effect the offices of Women's Business Ownership...and the Office of Veterans Affairs...

Today, women make up 4% of the veteran population, but in many cases, we do not keep separate statistics, as our Congressional mandate requires us to serve all veterans.

However, during fiscal years 1983-1986, women received almost 8,000 (7,927) SBA loans for a total of $845 million or 8% of all SBA loans. Seven percent of these loans were made to women veterans. This means that 539 loans for $65 million were made to women veterans. Of this total, Vietnam-era women veterans received 27 loans which totalled $1.4 million.

Our records show women veteran entrepreneurs entered mostly into retail trade and service-type industries....The Small Business Administration has helped launch two new car dealerships, a boat dealer, an electrical and plumbing contractor and an airport flying service and they are all women veterans! These businesses are located in 44 states. Texas, California, Missouri, Nevada, Louisiana are the top five for women veteran business ownership.

We were surprised and saddened to learn that women veterans are substantially less likely than their non-veteran counterparts to be small business owners. Why? The experts have given us theory only...but we tend to think during the time veterans spend in service away from the main-stream, their counterparts make more contacts within the business world and gain more business-related experience than the women veteran.

Also, veterans make good workers and are more likely to become successes as salaried employees in someone elses company and thus never take the opportunity to start their own business. Another study shows that veterans continue to use the skills from their military service such as, electronics....security...computer knowledge...areas, that have low instances of self-employment.

We feel all of these facts combine to make strong arguments for special veterans programs....for men and women.

Your likely next question is: What is SBA doing for women veterans? And the answer is: Our customers are many and

Marine Green....Air Force, Navy and Coast Guard Blue....We are concentrating our program on all veterans and many women participate in our activities.

SBA Veterans Affairs is this year launching five major training projects around the country....adding up to more than half a million dollars. The pilot of these entrepreneurial courses was launched last year in cooperation with the U.S. Department of Labor and the State of South Carolina. To date, 60 specially selected veterans are being trained in a 21-month program that involves...counseling sessions and classroom work in business start-up. So far, 16 of the veterans have already started their own businesses... and at least 85% of the students are expected to eventually start a business. We are proud to say the 16 businesses that have already started....have created a total of 31 new jobs in South Carolina, many of them for fellow veterans.

The Small Business Administration also operates a toll-free "Answer Desk" number used to answer questions from potential new business owners.

And last year over 4,000 of their calls were from veterans. The most frequently asked question was: "How do I start a business?"

Our statistics show most small businesses in America that fail...do so within their first three years of operation. The reasons are mainly lack of management skills and secondly lack of adequate capital. SBA is marshalling its resources in every state to combat these failures. We rely on

S.C.O.R.E., The Service Corps of Retired Executives, to volunteer their time and experience to help the young entrepreneur get on his feet and stay there. We are also in the process of creating Veterans' Business Resource Councils in the major areas. These are volunteer groups of active business executives who also reach out to the new business owner.

SBA Regional and District Offices plan to hold more than 200 pre-business workshops and conferences, including tax seminars, business problem clinics, procurement and franchise fairs during this year....for veterans.

Due to a mandate from the 99th Congress, The Small Business Administration is also in the process of hiring 10 new Veterans Affairs Officers...one for each of our 10 Regional Offices. This will greatly increase our outreach and educational program.

It has been a pleasure being here to tell our SBA story today and with the guidance of our new Administrator, Former U.S. Senator James Abdnor, it is a pleasure to serve our Nation's veterans.... both men and women.

STATEMENT OF THE AMERICAN VETERANS COMMITTEE

Before the Subcommittee on Oversight and Investigations of the House Veterans Committee on the current status and concerns of women veterans.

April 2, 1987

Mr. Chairman and Members of the Subcommittee:

It is a great privilege for me to present the views of the American Veterans Committee on the subject of women veterans' current status. My name is June A. Willenz; I serve as the Executive Director of the American Veterans Committee. I am also the author of Women Veterans: America's Forgotten Heroines, which was published in 1983.

The American Veterans Committee commends the Subcommittee for holding this hearing to review the situation of women veterans in our society, particularly since we have placed the subject of women veterans high among our concerns for many years. In March 1983, just four years ago, the first hearings to focus solely on women veterans were held by House and Senate Veterans Committees. We were honored to present testimony during both landmark hearings and strongly urged enactment of legislation that would set up a VA Advisory Committee on Women Veterans which we had proposed many years earlier. That VA Advisory Committee on Women Veterans was formed and appointed by then VA Administrator Harry Walters and later was made statutory by the Congress. I am proud to have served for the first three years of that Advisory Committee's existence and can attest personally to its enormous accomplishments. The work of the Advisory Committee and the Veterans Administration's actions in response to the

Committee's investigations and recommendations are chronicled in the 1984 and 1986 Reports to the Congress which you have before you.

As we look at the situation of women veterans today, it is important to remember historical background. In a paper I gave before the American Political Science Association several months ago, "Invisible Segment of a Veterans Population: Women Veterans Past Omissions and Current Corrections," I discussed the situation of women veterans in the late seventies when neglect characterized their situation:

> Numerically, they were submerged in an overwhelmingly large male population which traditionally had been an all-male enclave. Policymakers and administrators either were unaware or indifferent to the small population of women veterans within the population and since they themselves did not seem interested in actively pursuing their veterans benefits rights, did not consider their specific needs. The result is a picture of neglect and omission based on gender for almost four decades of a distinctive category of women....
>
> The picture of omission and neglect was not based on legal or regulatory exclusions. First, 'equal rights' was not a consideration until recently; second, there seemed to be an implicit assumption that equal status under the law would take care of 'equality' objectives. The story of women veterns falling through the cracks of the established framework of veterans benefits despite this so-called legal equality demonstrates that this standing in some instances does not necessarily mean that all segments of the targeted population benefit. In this case, a small minority without a tradition or history within the larger group was easily overlooked.

The Lou Harris Survey of Women Veterans, the first comprehensive survey of its kind, commissioned by the VA, noted in its report in 1985 the low usage of veterans benefits by women veterans and suggested it reflected a problem of benefit awareness rather than preference. The Survey suggested that "there is still a need of publicity directed at the woman veteran."

Commenting on the progress made since the creation of the VA Advisory Committee, the above mentioned paper pointed out:

> There is no doubt that many omissions have been recognized and many corrections have already been made by the VA in its policies for women veterans. The leadership given by the VA Administrator and the oversight of the Congress have contributed to that record of correction. Another factor in the 'success' story is the increased articulateness of the women veterans themselves, the proliferation of new ad hoc women veterans groups around the country and an increased awareness and involvement of the older veterans organizations...,
>
> Whether this success story will persist and whether the momentum for change will continue unabated is unknown at this point. While the resolve and commitment of the Advisory Committee are high, some of the conditions for success have changed.... The current stringent budget cuts and enactment of PL 99-272, requiring a means test for veterans to obtain non-service connected care from the VA Hospital System may well adversely affect women veterans.
>
> Under this law and the new terms of eligibility, the mix of service connected and non-service connected is going to change. Women veterans who might have been able to come to VA hospitals, as men had, for over three decades, with non-service connected ailments, particularly as outpatients, will be restricted. This is an irony that will not be lost on women veterans. Just as the system begins to be responsive to their needs other contingencies narrow their eligibility....
>
> It is particularly ironic that the call for 'outreach' to women veterans comes at a time of increasingly shrinking federal resources, including VA resources. With the emphasis in 1986 on cutting back on programs, with the demands for spartan budgets to meet Gramm-Rudman requirements, there will be fewer facilities, fewer programs, fewer beds, fewer staff personnel, available to the total veterans population. Therefore women veterans who have been shortchanged up to very recently, when they finally become aware of their benefits, may find that it is too late to use them. There is a real question whether further corrections which will require new programs and/or services, meaning allocations of money, will survive to help meet the still unmet needs of women veterans.

With the permission of the Committee Chairman, I am attaching that paper to this testimony as an appendix.

* * *

We would like to address now an area of great importance to many women veterans--employment. The Lou Harris Survey identified employment as a major concern for women veterans.

"The second most often mentioned type of post-separation problems were work-related. The three work-related problems most often mentioned specifically are problems finding work, applying or using military training in the civilian workforce, and job discrimination towards women," the Survey stated in its chapter entitled, "Problems of Women Veterans."

We were very pleased to cooperate with the Women's Bureau and the Assistant Secretary of Labor for Veterans Employment and Training, in seeking to find out how women veterans who used the public employment offices were faring in the civilian workplace. To that end we conducted a limited study on the "Employment Experiences of Women Veterans Placed by Selected Public Employment Offices" in 1985 under the auspices of the Women's Bureau of the Department of Labor. That project examined the kinds of jobs a selected group of women veterans got through the public employment offices and explored the effects of the military experience on this particular group of women veterans.

This project was to assist the Department of Labor in its Employment programs for women veterans; hence the focus of the public employment office system which is an intrinsic part of the Department. We wish to commend both the Women's Bureau and the Assistant Secretary of Labor for Veterans Employment and Training for their strong interest and commitment to the occupational well-being of women veterans, and for taking the initiative to investigate what was happening to women veterans in the workplace. Their interest in finding out the facts so that they could improve programs and services for women veterans was an important step forward in mitigating a key worry for women veterans.

The study, "Employment Experiences of Women Veterans Placed by Selected Public Employment Offices," conducted under their auspices, was a limited one. We used a small sample and focussed only on the experiences of women who turned to the public employment offices when they were seeking jobs. For example, almost no officers were included in our sample. Since generally most professional and skilled jobs are filled through other channels than the public employment offices, such as college placement offices, private employment agenices, professional and trade union organizations, and personal contacts, more highly skilled women veterans did not seek the assistance of the public employment offices and were therefore not included in the sample.

We think the findings of this study, the first of its kind, are significant and deserve serious attention. However, because of the caveats mentioned above, we wish to emphasize that these findings are significant for many thousandsof women who came to the public employment offices for help, former enlisted women, but they cannot be generalized for the entire population of women veterans.

Among the findings based on the group of women veterans studies were:

--the military experience of the group of women veterans studied did not seem to impact positively on their post-service employment, either on the kinds of jobs they sought and got, or on their wages;

--the women veterans studied were in the lower end of the earning spectrum, despite the fact that almost all were high school graduates;

—the women who had nontraditional military training did not seem to seek out or obtain employment commensurate with their backgrounds. Furthermore, having a nontraditional job in the military did not seem to lead to a similar job in the civilian sector;

--the women veterans overwhelmingly prefer jobs traditional for women in the white-collar and service fields;

--the women veterans are more likely to get the jobs of their choice if they seek white-collar and service jobs;

--the women veterans were considered easier to place in jobs than male veterans.

Most surprising were the relatively low wage rates of women placed by the employment service, and the apparently limited recognition of their military training and experience. This was particularly striking since only one percent of the women had less than 12 years of schooling—eight percent were college graduates and 34% had some college.

It seemed from our study that the military experience did not significantly affect the level of earnings of these women veterans applicants to the public employment offices. The likelihood of their receiving higher earnings did not increase with being placed in the same occupation as they had in the military. However, increasing length of military service seems to have a positive impact on their earning power. Yet it can be presumed that those who stayed in military service were older and more experienced, and hence their earning power would be expected to be greater.

Previous analytical studies have shown that male veterans as a group do better economically than non-veterans. While we were dealing with a select sample from one particular segment of the women veterans population--non-officer, and those who turn to the public employment offices--these findings were surprising. Even among the least skilled, from previous studies, one would have expected that the training and experience gained in the military would be useful for women veterans as they seek civilian employment. The findings of this study did not demonstrate that. In fact, it could be legitimately questioned from these findings whether enlisted young women may be at a disadvantage when they seek to enter the civilian workforce.

Included in this study are some suggestions as to future studies and remedial actions that might be made at the local employment office level. They are spelled out in the Summary and Conclusions of that study. We are pleased that the Women's Bureau has followed through with further exploration of the employment situation of women veterans by initiating a local demonstration project. Both the Women's Bureau and the Assistant Secretary of Labor for Veterans Employment and Training have continued to express a strong interest in upgrading the employability of women who have served in the military when they seek to enter the civilian workplace.

From this study (which we hope will be made available), it seems that those women veterans coming into the public employment offices are not benefitting from their military service in ways that they might. Traditionally, the least skilled and the hardest-to-place come to the employment services for assistance. It is this segment of the working population that needs the most help.

With additional resources, the Assistant Secretary of Labor for Veterans Employment and Training could upgrade and target specific services for the women veterans at the public employment service offices. Also, further in-depth investigation would be useful in pinpointing the factors that could account for the disappointing work profile of this particular group of women veterans. It is clear that more funding is needed if these kinds of studies and programs are to be targeted to help meet the employment needs of women veterans.

We are confident that the Women's Bureau and the Veterans Employment and Training Service are committed to improving employment possibilities for women veterans. With shrinking resources throughout government, that task becomes more difficult. It is our hope that women veterans will not be shortchanged and that monies for special programs will be allocated for those purposes.

We thank the Subcommittee for the opportunity to present these views and observations on this important subject.

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Statement of

Mary R. Stout

National Secretary

Vietnam Veterans of America

on the

Status and Concerns of Women Veterans

before the

Subcommittee on Oversight and Investigations

of the

Committee on Veterans Affairs

U.S. House of Representatives

April 2, 1987

Mr. Chairman and members of the Committee, I want to thank you for the opportunity to present the views of Vietnam Veterans of America on issues affecting women veterans and express my gratitude to you for holding this hearing.

Vietnam Veterans of America (VVA) is proud of the leadership role we have taken in addressing the needs of women veterans and recognizing the unique contributions of women as part of the military services and the veterans community. I take great pride as a woman veteran in being a member of Vietnam Veterans of America. There are women veterans in VVA serving on the Boards of Directors and as officers in our Chapters, State Councils and National organization. VVA representatives have presented the special issues of women veterans at Vet Center training sessions, community seminars, special VVA programs and in testimony to Congress. There are members of VVA serving on state commissions on women veterans, on Vietnam Veteran Memorial Commissions and one of the founders of the Vietnam Womens Memorial Project served as our legislative coordinator for the state of Wisconsin.

Our organization is specifically committed to those who served our country during the Vietnam Era. One of the results of our outreach to women of this era is a connection with women who served in Vietnam in other than military status. Our associate membership roles include numerous former members of the Red Cross, United Services Organization and women who served in various civilian capacities.

It was through the urging of Vietnam Veterans of America's Special Project on Women Veterans, established within a few months of VVA's incorporation as a veterans service organization, that Senator Daniel Inouye called for the Government Accounting Office Report "ACTIONS NEEDED TO INSURE THAT FEMALE VETERANS HAVE EQUAL ACCESS TO VA BENEFITS". This landmark report led to numerous changes in the outreach and service to women veterans in this country. Vietnam Veterans of America was also very instrumental in the Congressional mandate to set up a Women Veterans Advisory Committee at the Veterans Administration. This Committee has made numerous recommendations to the Veterans Administrator and has seen many of these recommendations implemented, but the task of addressing the needs of the growing number of women veterans is far from over.

OUTREACH

One of the major problems identified by the 1985 Harris Survey reported in providing service to women veterans is the lack of knowledge by these veterans of available benefits. While there are numerous veterans service organizations who provide such information there have been few efforts through these traditional sources to reach women. In fact, until recent years many women did not feel welcomed as a part of the membership and were often encouraged to join womens' auxiliaries. Women who were aware of their benefits often had to explain to VA counselors that they were applying for benefits for themselves rather than their husbands. The lack of awareness on the part of the general public of the service of women and the often innuendo laden treatment of women made it more comfortable for women veterans to hide their service experience particularly during the Vietnam period when public opinion was definitely negative to those who served in the military.

During World War II many women were brought into the service to "free the men to fight". This attitude and the lack of advancement for women in the military encouraged many to leave the service with the attitude of somehow not having served in the same way as men and therefore being less of a veteran and not entitled to the same services.

Without the contact with traditional sources of information, the view of being second class veterans and perhaps the need to hide their veteran experience, women veterans have not used the benefits available to them in anywhere near the proportions of their male veteran counterparts.

As a result of recommendations of the Advisory Committee on Women Veterans the VA has recently produced brochures, traveling exhibits, posters and public service announcements targeted specifically at female veterans. The brochures have been supplied in quantity to VA facilities and women veterans organizations. This is certainly a step in the right direction but much more needs to be done.

The network of women veterans coordinators in VA facilities would be the best means for more outreach. These coordinators are familiar with the services and/or benefits available, However, the responsibilities of these positions are in addition to other responsibilities of the individuals and therefore cannot be the primary focus of the persons named.

Vietnam Veterans of America recommends that consideration be given to naming full time women veteran coordinators at each VA Regional Office for a period of two years charged primarily with outreach and education. Special attention should be given to reaching women through local print and electronic media. Memorial Day and Veterans Day should be used to highlight local women veterans. Outreach should be targeted to senior citizen centers and professional womens groups. Information on veterans services targeted toward women must be readily available to all women exiting military service now and in the future.

HEALTH CARE

The discussions of health care as a right of citizenship have been widely debated for a number of years. Veterans for the most part have not been a part of this debate because their health care needs have been theoretically addressed by the VA Medical system whether their needs are related to their military service or not. The VA has built a system that according to the GAO report cited earlier has "traditionally been sized and staffed to provide care to both service-connected and nonservice-connected patients." While the GAO questions if the VA should size facilities to serve both categories its report stated that as long as it does so" it should insure equal access to care for female veterans."

As a result of this study and the work of the Women Veterans Advisory Committee headed first by Col. Lorraine Rossi, USA (Ret) and now by MG Jeanne Holm, USAF (Ret.) many of the most blatant forms discrimination against women veterans have been addressed and are being corrected. This discrimination, while not necessarily specifically attributable to gender was attributed to the small numbers of women pursuing services from VA medical facilities and considerations for staffing for gender specific health care needs and privacy considerations.

The VA is to be commended on many of the steps it has taken to provide services to women veterans. Complete physical examinations of women veterans must now include breast and pelvic examinations. Gynecological services must be available to all in-patients and those in VA nursing homes and domiciliaries. VA Medical Centers and outpatient clinics are mandated to provide gynecological care by at least one method besides fee basis care. New construction at VA facilities and renovations are providing needed privacy which serves female as well as male patients.

There is some preliminary data available from the Harris study which indicates a higher incidence of cancer among women veterans than the general population of women. While Vietnam Veterans of America agrees with the VA Women Veterans Advisory Committee that careful statistical analysis is needed to further verify this data we recommend that Pap Smears be performed regularly as a part of physical examinations and that mammography to detect breast cancer be made available to all women veterans requesting such procedures.

Women who served in Vietnam, both military and civilian, continue to be concerned with the unresolved questions about the effects of toxic herbicides. We are looking forward to the experience study of women who served in Vietnam to help provide answers on this issue.

PSYCHOLOGICAL SERVICES

The VA Readjustment Counseling Service through the Vet Center Program has been a shining example of service to women veterans. Vietnam Veterans of America has worked very closely with this program from its beginnings to assist in the outreach and identification of methods for providing counseling for this group. Finding enough women to form their own therapeutic groups at any one Center has been a stumbling block but a number of programs have been highly successful. As women learn more about VA services in general we feel the demand for these counseling programs will increase. There is a view that only women who served in Vietnam could be having difficulties related to their service. We must remember that severely wounded soldiers were cared for in military facilities outside Vietnam and many women were involved in that care both in medical facilities and other capacities. They also bore the brunt of criticism for serving in the military.

Vietnam Veterans of America is concerned that inpatient treatment for women veterans suffering Post Traumatic Stress Disorder is not readily available and where available women are not fully integrated into the program. One of the few women we are aware of was housed completely separately from the PTSD unit.

A recent survey of VA Medical Centers, requested by the Women Veterans Advisory Committee, concerning the availability of drug and alcohol treatment programs showed that only three facilities had reported programs. One of the most impressive utilized the services of five community organizations specifically for women on a contract provider basis. Vietnam Veterans of America is well aware that many psychologically based programs are more effective when they deal with problems related to the life experience and role distinctions of women. VVA encourages the use of such community programs when there are not sufficient numbers of women seeking these services to provide them in the VA.

ECONOMIC ISSUES

The second most commonly mentioned problem by women veterans in the "Survey of Females Veterans" were work related problems. These problems were noted by 17% of the women surveyed of all generations. Employment difficulties were of highest concern among younger veterans, with one fourth of Vietnam era women (23%) and over one third (38%) of post Vietnam era women listing it as a major concern. To some extent this seemed to be related to lack of applicability of military skills and general societal attitudes toward them as veterans and as women. The indications are, from this same survey, that both unemployment and underemployment of significant proportions is present among women veterans and that is age linked to some degree. The highest underemployment is for those 18-44, with at least 18% able to only to find part time work. The unemployment rates for more narrow cohorts shows that 27% of those 18-24 years old were unable to find work, 11% of those 25-34 were unemployed, and 7% of women 35-39. When taken together with other data, these statistics suggest that women veterans are experiencing readjustment difficulties with employment that mirrors that of their male counterparts but which is heightened by lack of information and additional barriers that work against them securing information and assistance in finding work for which they are capable and qualified.

It is significant that the same younger women who have the greatest difficulty with employment also report the greatest difficulty in coping with both the lack of recognition of younger veterans in general that is compounded by people's attitude toward women veterans in particular.

The difficulty that these women face is where to go for assistance.

The structure designed to assist all veterans experiencing employment difficulties is the "Veterans Employment and Training Service" (VETS) at the Department of Labor (DOL). In 1985 the Women's Bureau of the Department of Labor contracted for a study entitled "Employment Experiences of Women Veterans Placed by Selected Public Employment Offices" by June Willenz. This study concentrated on five of the "best" states in terms of their attempted responsiveness to the needs of women veterans. The findings of the study resulted in suggested actions that can be categorized under the three broad headings of a) information gathering about women veterans seeking assistance; b) in-service training of Employment Service personnel about women veterans; and c) specific outreach efforts directed toward women veterans. Most of the specific recommendations made by this study have not been implemented with the exception of one demonstration project in the state of Washington, funded in major part by the Honorable Donald Shasteen, Assistant Secretary of Labor for Veterans Employment and Training from Title IV-C JTPA funds.

Vietnam Veterans of America believes that there is no reason that DOL cannot move forward in implementing better data collection about women veterans. Even more important is moving ahead with training of VETS personnel in the special problems and characteristics of women veterans, strategies for outreach to this group and publicity/public relations skills and materials that can be utilized by personnel at the local level. One specific example of a means to accomplish these goals that could be taken immediately is the insertion of a training unit on women veterans in the curriculum of the National Veterans Training Institute (NVTI).

Vietnam Veterans of America has recommended to the Small Business Administration on numerous occasions that one or more pilot outreach programs for women veterans be attempted. This recommendation has been supported by a unanimous vote of the National Advisory Committee on Veterans Business Affairs at the SBA. It has been VVA's contention that a significant proportion of women veterans, to a greater extent than their male counterparts, have the training, skills and financial history to successfully own and operate a small business. The SBA commissioned studies summarized in "VETERANS AND ENTREPENEURSHIP: A RESEARCH DIGEST" bears this out. The studies found that women veterans succeed in earning "substantially more in self-employment than their nonveteran peers" once they are able to surmount the barriers to business entry. The programs to provide "special consideration" to veterans apply equally to women veterans. For the past two years funds allocated for outreach and training programs for veterans have been turned back to general funds and yet not one specific program for women veterans has been attempted.

CONCLUSION

Vietnam Veterans of America is pleased with the progress made in addressing the needs of women veterans. Several important studies have supplied valuable information on this growing sector of the veteran population and should assist the Veterans Administration and other government agencies in planning for the future increase in demands for services.

We also applaud the the work of the VA Advisory Committee on Women Veterans and are grateful that VVA has recently been granted a position on this valuable committee.

The needs of women veterans will be fully met however, only when all veterans, the VA, governmental agencies, congressional committees and women veterans themselves acknowledge that these are not special programs but are necessary elements in our society's obligation to care for those who have been lessened by service to our country.

STATEMENT OF

GORDON R. THORSON, SPECIAL ASSISTANT
NATIONAL LEGISLATIVE SERVICE
VETERANS OF FOREIGN WARS OF THE UNITED STATES

BEFORE THE

SUBCOMMITTEE ON OVERSIGHT AND INVESTIGATIONS
COMMITTEE ON VETERANS' AFFAIRS
UNITED STATES HOUSE OF REPRESENTATIVES

WITH RESPECT TO

CURRENT STATUS AND CONCERNS OF WOMEN VETERANS

WASHINGTON, D. C. APRIL 2, 1987

MR. CHAIRMAN AND MEMBERS OF THE SUBCOMMITTEE:

It is my privilege to appear today and express the viewpoint of the 2.7 million men and women that make up our proud organization and Ladies Auxiliary. The Veterans of Foreign Wars fully recognizes the unselfish commitment exhibited by all who have honorably served in the United States military. All people, male and female, willing to maintain true allegiance and true patriotism by preserving and defending our great nation, deserve to be treated fairly and equally.

Mr. Chairman, the testimony today centers around examining the benefits and services provided to women veterans by the Veterans Administration and how successful efforts have been to increase the level of women veteran program participation. The VFW is favorably impressed with the responsiveness exhibited by the Veterans Administration and the resultant increase in female veteran utilization of VA services.

The Veterans Administration Advisory Committee on Women Veterans was orginally established back in 1983, to advise the agency on meeting the special needs of women veterans. It soon became apparent that many inadequacies existed in providing medical care for women veterans in VA clinics and hospitals. As a combined result of the male oriented VA hospital system and a general lack of benefit awareness, many female veterans weren't utilizing VA benefits and services. The Women Veteran Advisory Committee moved swiftly to rectify the inequalities that existed in the VA system and to heighten public awareness of women veterans and their entitlement to the same rights and privileges enjoyed by male veterans.

It is unnecessary to cite the many issues addressed, nor is it necessary to list the numerous recommendations made by this committee, the overall accomplishments speak for themselves. As a result of diligent efforts, the Women Veteran Advisory Committee working with the full cooperation of the VA, women veterans are no longer a forgotten group within the Veterans Administration. Their continued and combined effort can only serve to improve and upgrade the care and treatment provided all veterans.

The Veterans of Foreign Wars has worked with the Advisory Committee and we have made every effort to assist the Women Veteran Coordinator at each VA Medical Center, by utilizing our network of Department Service Officers and National Field Representatives. Our field representatives make it a practice to meet with each Veterans Administration Medical Center (VAMC) Women Veteran Coordinator during periodic hospital surveys and discuss any problems the coordinators may be having. For the most part our staff reports that assigning a Women Veteran Coordinator at each hospital site has been a resounding success. According to our sources, this single recommendation to appoint a coordinator to act as a liaison for patients, an ombudsman, a staff representative and administrator's representative has significantly contributed to ensuring the proper care and treatment of female patients.

The VFW does have some suggestions to further improve VA responsiveness to women veterans:

1.) We suggest that at some VAMC's the individual assigned as the Women Veteran Coordinator may be overburdened with too many other VA priorities, thus diminishing their effectiveness.

2.) We also suggest that further efforts should be made to develop and enhance the Women Veteran Coordinator program. This could allow for increased training, interaction, feedback and a more uniform application of program priorities and recommendations.

Mr. Chairman, the Veterans of Foreign Wars is impressed with the quick action taken and the positive results achieved by the Advisory Committee. We are pleased to continue our support of the Women Veteran Advisory Committee's activities in addressing the special needs of women veterans.

The term "Veteran" applies to all former members of the armed forces and the sooner we all totally recognize and accept this fact, the better. Fair and equal treatment is not just a good idea, but a mandate.

STATEMENT OF
RICHARD F. SCHULTZ
ASSOCIATE NATIONAL LEGISLATIVE DIRECTOR
DISABLED AMERICAN VETERANS
BEFORE THE
SUBCOMMITTEE ON OVERSIGHT AND INVESTIGATIONS
OF THE
HOUSE COMMITTEE ON VETERANS AFFAIRS
April 2, 1987

MR. CHAIRMAN AND MEMBERS OF THE SUBCOMMITTEE:

On behalf of the more than 1.1 million members of the Disabled American Veterans and its Ladies' Auxiliary, I wish to thank you for soliciting our views on the current status and concerns of women veterans.

Mr. Chairman, as you know, the membership of the DAV is composed of honorably discharged veterans (women and men) who were wounded, injured or otherwise disabled in wartime service to this country. From its inception in 1922 and continuing to the present, the DAV has welcomed and will continue to welcome eligible veterans to its ranks.

Currently, women DAV members hold elected positions in our Chapters and state Departments and we also employ three women -- each of whom is a service-connected disabled veteran -- in our corps of professionally trained National Service Officers.

Mr. Chairman, the DAV shares your concern for our nation's women veterans -- especially those with service-connected disabilities. And, I can assure you that the DAV will continue in its efforts to see that all of our nation's service-connected disabled veterans receive the benefits and services to which they are entitled.

Historically, our women veterans have not received the recognition they truly deserve. Even before the establishment of women in the U.S. military forces, women served our country during time of war. Women such as Deborah Sampson who, disguised as a man, twice enlisted in the Confederate Army and whose gender was not discovered until doctors treated her for wounds received in combat, are well known. Indeed, our nation's history is replete with historical accounts of how women served our nation during time of war. However, it was not until after World War II that women were fully accepted as members in our armed services.

Today, women represent over 4% of our veteran population and nearly 12% of all active duty military personnel. As you can see, their numbers are growing and, consequently, their use of VA benefits and services will increase.

Mr. Chairman, our nation's women veterans are finally realizing a degree of recognition they justly deserve. This, in large part, is due to the enactment of Public Law 98-160, which established within the Veterans Administration an Advisory Committee on Women Veterans and mandated the VA to insure that their health care facilities provide appropriate treatment to gender specific disabilities in a timely fashion.

Since that time, other significant legislation has been signed into law recognizing women veterans. Each year since 1984 the President has proclaimed a week in November as "National Women Veterans Recognition Week." And, most recently, Public Law 99-610 was signed into law authorizing the establishment of a memorial to honor women who served in or with the U.S. Armed Forces.

The VA has also contributed to the public recognition of women veterans. Among other things, they have issued public service announcements and pamphlets advising women of their rights as veterans. One of their most significant contributions to the recognition of women veterans has been their commissioning of Louis Harris and Associates to conduct a survey of female veterans. This survey not only provides much needed data on female veterans, but it also has heightened the awareness of the military service provided by women.

Veterans' service organizations have also contributed to the recognition of women veterans. The DAV has published several articles in our monthly magazine on issues affecting women veterans. We have also hosted receptions for the VA's Women Veterans Coordinators during their meeting in Washington, D.C. and for the women who are former prisoners-of-war and who attended a viewing of the television movie, "Women of Valor," at the Kennedy Center.

For the most part, Mr. Chairman, women veterans are now being recognized for their contributions in the U.S. Armed Forces and are becoming more aware of their benefits. This has come about, in large measure, as a result of actions taken by Congress, the Veterans Administration and veterans' service organizations.

Mr. Chairman, I would like to comment on two important events which have, in a most meaningful way, benefitted women veterans -- that being the enactment of Public Law 98-160 which established the VA's Advisory Committee on Women Veterans and that Committee's recommendation which established the VA's Women Veterans Coordinators.

As you know, Public Law 98-160 established, among other things, an Advisory Committee on Women Veterans. This Committee, appointed by the Administrator of Veterans Affairs, has among its members:

* representatives of women veterans;

* individuals who are recognized authorities on the needs of women veterans, including their gender related health care needs; and

* female and male veterans with service-connected disabilities.

Also included on this Committee as ex officio members are representatives from the Departments of Labor and Defense, and the VA's Department of Medicine and Surgery.

The VA's Advisory Committee on Women Veterans has met several times between September 1983 and September 1986 with a meeting scheduled for late March 1987. As a result of these meetings, several recommendations have been made to the Administrator on issues of concern to female veterans. These recommendations cover a wide range of issues and include: the aging of women veterans, research on gynecologic conditions, the VA's mammography pilot program, issues relating to Agent Orange, post-traumatic stress disorder, employment and training, outreach, improvements in the area of gender related treatment at VA medical centers and increased awareness for the privacy needs of female patients.

Mr. Chairman, the DAV's representative on the VA's Women Veterans Advisory Committee is National Service Officer (NSO) Alberta Suresch, a service-connected disabled veteran of the Vietnam Era. After being appointed to the Committee, NSO

Suresch's top priority was to convince the Committee of the need for a Women Veterans Coordinator at VA medical centers to assist women veterans in obtaining health care to which they are legally entitled . I am pleased to note that the VA has established such a position at their health care facilities and regional offices.

It is through the dedication and diligence of these individuals that VA medical facilities have been improved to meet the needs of women veterans. Subjects such as gender related treatment, attitude of staff and the privacy of female patients have been fully addressed due to the untiring work of the Women Veterans Coordinators.

As mentioned earlier, the VA's Women Veterans Coordinators have met in Washington, D.C. We understand one major accomplishment of these meetings was that the Coordinators returned to their facilities with a stronger sense of commitment to solving gender related problems within VA health care facilities. Some Coordinators have also set up in-house advisory committees which have improved the delivery of care for women veterans and sensitized VA staff to the needs of female veterans.

Mr. Chairman, the importance of the VA's Advisory Committee on Women Veterans and the Women Veterans Coordinators at VA medical centers and regional offices cannot be overstated. We believe that their existence has dramatically improved the delivery of services to women veterans and we do hope that they will continue in the future to provide women veterans with this valuable service.

Mr. Chairman, as you know, the Veterans Administration's Department of Veterans Benefits is responsible for adjudicating the claims of the more than 2.2 million service-connected disabled veterans receiving VA compensation payments. Of this number, over 30,000 are women veterans and a significant number of these claims are for gender related disabilities.

Quite naturally, the DAV is vitally concerned with the adjudication of VA compensation claims. It is with this concern in mind that NSO Suresch contacted the VA's Department of Veterans Benefits at VA Central Office requesting that they change their Circular dealing with post-traumatic stress disorder claims to include rape and assault in the list of stressors needed to diagnose a post-traumatic stress disorder. We understand that this has been accomplished.

Ms. Suresch has also recommended to DVB that they include women gender related issues in the training of Rating Board personnel and to include women's gender related compensation claims in their quality review of VA claims.

Other areas of major concern which need to be addressed are contained in the Louis Harris and Associates survey conducted in 1985. Their findings show that women veterans have a low rate of usage of VA programs and that the lifetime prevalence of cancer among women veterans is nearly twice as high as among the general population of adult women.

While we understand that the data reflecting an increased occurrence of cancer among women veterans are only preliminary conclusions, we strongly recommend that the VA look further into this issue to ascertain the significance of the survey findings. We also note that the low usage of VA benefits by women veterans is an awareness problem rather than preference and we encourage the VA to continue in their efforts to inform women of their rights as veterans.

Mr. Chairman, the gains made by women veterans over the past several years in terms of their recognition as full-fledged veterans, their increased awareness of VA benefit availability and the positive response of VA health care facilities to their special needs has come a long way. This is not to say, however, that we should cease in our efforts on behalf of women veterans. Indeed, we must continue in our combined efforts to see that needs of women veterans are properly met and they receive the benefits and services to which they are legally entitled.

This concludes my statement, Mr. Chairman, and I will be pleased to answer any questions you may have.

Statement of

The American Legion

1608 K STREET, N. W.
WASHINGTON, D. C. 20006

by

PAUL S. EGAN, DEPUTY DIRECTOR
NATIONAL LEGISLATIVE COMMISSION
THE AMERICAN LEGION

and

RODNEY S. KIRK, ASSISTANT DIRECTOR
NATIONAL VETERANS AFFAIRS AND REHABILITATION COMMISSION
THE AMERICAN LEGION

before the

SUBCOMMITTEE ON OVERSIGHT AND INVESTIGATIONS
COMMITTEE ON VETERANS AFFAIRS
U.S. HOUSE OF REPRESENTATIVES

on

VA BENEFITS FOR WOMEN VETERANS

on

April 2, 1987

STATEMENT OF RODNEY S. KIRK, ASSISTANT DIRECTOR
NATIONAL VETERANS AFFAIRS AND REHABILITATION COMMISSION
THE AMERICAN LEGION
BEFORE THE SUBCOMMITTEE ON OVERSIGHT AND INVESTIGATIONS
COMMITTEE ON VETERANS AFFAIRS
U.S. HOUSE OF REPRESENTATIVES
APRIL 2, 1987

Mr. Chairman and Members of the Subcommitee:

The American Legion appreciates this opportunity to express to the Subcommittee its views on the current status of women veterans with respect to the manner in which they are receiving medical care and other benefits and services from the Veterans Administration.

However, with your permission, Mr. Chairman, before addressing these issues, may we take this opportunity to express the gratitude of The American Legion to those women veterans who have gallantly served in the Armed Forces of this nation. Since its founding in 1919, The American Legion has welcomed women veterans in our membership. As early as the 1930's, a woman served on the Legion's National Executive Committee, one of our two policy making bodies. Throughout our history, a substantial number of ladies have been elected to the respected position of State Commander, and other National, State and local offices. Women veterans have provided valuable service as professional employees of The American Legion since before the end of WW II, and at the present time, we are privileged to have women veterans serving the Legion as Claims Representatives, Department Service Officers and Accredited Representatives in state and county veterans service offices.

Currently, there are over 100 American Legion Posts totally membered by women veterans and thousands of women veterans in other Posts throughout the United States.

May it be said that The American Legion is extremely honored at this time to have serving on the Veterans Administration Advisory Committee on Women Veterans, Mrs. Margaret Malone, of Trenton, New Jersey. Mrs. Malone was the first women to serve in the capacity of National Vice Commander of The American Legion. Mrs. Malone, and other Advisory Committee members, past and present, are to be commended for their perseverance, hard work, and intense deliberations toward the important issues under the Committee's jurisdiction.

Since its initial meeting in September 1983, the efforts and recommendations of the Veterans Administration Advisory Committee on Women Veterans have resulted in substantial changes and accomplishments regarding women veterans issues. Many improvements are noticeable throughout the VA medical care system with respect to privacy, special personnel and equipment needs, and increasing VA staff awareness of women veterans' gender-related medical problems. Overall, responsiveness of the VA in addressing Committee recommendations has been both noteworthy and timely.

The Legion's Field Representatives routinely check on the manner and timeliness in which VA facilities are providing health care to women veterans at all outpatient clinics and medical centers surveyed. Their site visits focus on availability of staff and equipment, including those requirements for gender-related conditions, as well as privacy concerns throughout the facility. In the main, very few major problems have been noted during recent surveys. However, although privacy concerns have generally subsided in the last few years, there still are some facilities at which improvements are needed to ensure women veterans adequate privacy. To the VA's credit, many of these areas have been identified and are awaiting funding for renovations to commence in 1988 and beyond.

There are also other problems that have been reported to us as existing at a specific facility or facilities that are not systemwide, one example being the inability of Women Veteran Coordinators not being able to function in that capacity because of other duties assigned them. In addition, there are sporatic reports that GYN examinations are not being adequately performed at one facility or another. It has been and will continue to be the policy of The American Legion to look into these matters when provided with specific details on such an incident.

As with the total veteran population, women veterans, many of whom are WW II veterans, are now coming into the time of life when their health problems will begin to increase. In addition, in general, women have a longer life span than men, indicating an anticipated increase in the usage of long-term care facilities, and other provisions relating to aging veterans.

The American Legion continues to stress outreach endeavors concerning women veterans. While much progress has been accomplished in this regard, through the efforts of many, The American Legion feels additional outreach efforts are needed. It is our opinion that despite vigorous outreach attempts, many women veterans continue to be unfamiliar with the fact that they are entitled to benefits and medical care, administered by VA, as a result of their military service. We are confident that the VA Advisory Committee on Women Veterans and others will continue the momentum, until as many women veterans as possible are informed and educated as to their eligibility for these benefits and services.

In view of the foregoing, The American Legion sees no need for the development of any specific legislation relating to additional benefits or similar matters.

In summary Mr. Chairman, The American Legion is pleased, as you and the Members of this Subcommmittee must be, at the improvements that have taken place in privacy, the availability of gender-related treatment, and the overall sensitivity of staff with respect to women veteran patients in the VA medical care system since long needed emphasis was focused on these issues in 1983. In addition, it is obvious to us that there now exists a much greater sense of awareness on the part of women veterans of the availability of and their entitlement to other benefits and services that are provided through the Veterans Administration to all veterans.

However, there remains some work to be done in the area of outreach to those women who have not, for whatever reason, learned of their eligibility for benefits and services resulting from their status as a veteran of the U.S. Armed Forces. The American Legion pledges its support toward that end, as this organization is of the opinion that no veteran, man or woman, who has served this country honestly and faithfully, should receive anything less than the full range of benefits that are provided to all veterans, through Congress, by a grateful nation.

Mr. Chairman, that concludes our statement.

WRITTEN COMMITTEE QUESTIONS

CHAIRMAN EVANS TO OFFICE OF PERSONNEL MANAGEMENT

UNITED STATES
OFFICE OF PERSONNEL MANAGEMENT
WASHINGTON, D.C. 20415

Office of the Director

MAY 2[illegible] 1987

Honorable Lane Evans
Chairman
Subcommittee on Oversight and Investigations
Committee on Veterans' Affairs
U.S. House of Representatives
Washington, D.C. 20515

Dear Mr. Evans:

This is in response to your letter of April 27, 1987, asking the Office of Personnel Management to answer four questions concerning women veterans, following the hearing of April 2, 1987.

The answers to your questions are enclosed. I hope they are useful to you and members of your Subcommittee.

Sincerely,

Constance Horner

Constance Horner
Director

Enclosure

Enclosure

Additional questions for OPM--Congressman Lane Evans

1.Q. You testified more than 20,000 women veterans have been employed by the Federal Government under the Veterans Readjustment Appointment authority. Please provide the number of women veterans employed under VRA by initial employment grade or level.

A. The following table shows available information. Data on initial employment grade or level of women VRA hires are available only since fiscal year 1981.

Women VRA Hires, Fiscal Years 1981 - 1985

GS-1	45
GS-2	328
GS-3	2989
GS-4	2127
GS-5	694
GS-6	142
GS-7 and above	180
Total, white-collar (General Schedule and equivalent)	6,505
WG-1	348
WG-2	65
WG-3	32
WG-4	117
WG-5	140
WG-6 and above	34
Total, blue-collar nonsupervisory (wage grade)	736
Total, all other pay plans	110
Total, all pay plans	7,351

2.Q. Please describe the OPM's outreach activities to women veterans. Are these activities effective? How is effectiveness determined?

A. We have taken many outreach activities to improve employment opportunities for veterans including women veterans. Significant activities include: providing technical advice and assistance to agencies, providing training to agencies on veterans employment, issuing veterans employment pamphlets, publicizing veterans employment through Federal Executive Boards and Interagency Advisory Groups, and dispensing job information through our network of Federal Job Information Centers.

We believe these activities are effective because the figures show that women veterans are taking advantage of employment opportunities in the Federal Government.

3.Q. Please describe how the Office of Personnel Management is responding to the post service employment problems experienced by women veterans.

A. The Veterans Administration conducts programs of job counseling and assistance with personal problems that may affect employability, available to male and female veterans alike. OPM plays a significant role by informing veterans of Federal employment opportunities and benefits, such as veterans preference and VRA hiring. Further, veterans employed by the Federal Government may be trained under the Government's extensive training programs, and may take advantage of Employee Assistance Programs, provided by Federal agencies under OPM's leadership, to help deal with personal problems.

HON. BOB STUMP TO OFFICE OF PERSONNEL MANAGEMENT

Additional question for OPM--Congressman Bob Stump

Are there OPM or Federal programs specifically targeted to hiring women veterans?

A. OPM has no programs specifically targeted to hiring women veterans. The Federal Government hires women veterans under the Veterans Readjustment Appointment Program, the special authority for noncompetitive appointment of 30 percent or more disabled veterans, and outside of these programs with the benefit of veterans preference.

CHAIRMAN EVANS TO VETERANS' ADMINISTRATION

Office of the
Administrator
of Veterans Affairs

Washington DC 20420

Veterans
Administration

JUN 15 1987

Honorable G. V. (Sonny) Montgomery
Chairman, Committee on Veterans'
Affairs
House of Representatives
Washington, D.C. 20515

Dear Mr. Chairman:

Enclosed please find the Agency's responses to the questions which were submitted following the April 2, 1987, hearing by the Subcommittee on Oversight and Investigations by Mr. Lane Evans, Chairman of the Subcommittee and Mr. Bob Stump. Thank you for the opportunity to provide this additional information for the record.

Sincerely,

THOMAS K. TURNAGE
Administrator

Enclosure

CONGRESSMAN EVANS

Question: 1. The Advisory Committee has issued two formal reports which contain many recommendations to the VA.

1a. Can all of the Advisory Committee recommendations for the VA be implemented? Which cannot?

Answer: The Veterans Administration considers the recommendations from the 1984 Report to have been implemented although some involve ongoing processes such as construction. The uniform guidelines for the Women Veteran Coordinator position are general since the needs vary from facility to facility and stringent guidelines might stifle the creativity which has been remarkable in many places. The 1986 Report has been distributed to the relevant departmental offices who have all indicated that they are carefully considering all the recommendations in their program planning. The Veterans Administration has accepted the Report and considers it extremely valuable guidance as actions are taken to provide equitable services to women veterans.

Question: 1b. Do any of the Advisory Committee recommendations require new legislative authority before being implemented? Which recommendation(s) need new legislative authority before implementation?

Answer: Only one recommendation requires legislative authority. In the 1986 Report (p.12) under Education - G.I. Bill, the Committee recommended that "The VA educational assistance allowances be exempted from the sequestration reduction of funds required under the Gramm-Rudman-Hollings Act."

Question: 2. Advisory Committee reports have contained many recommendations for improvements in the Veterans Canteen Service. Please describe the changes which have occurred in responding to the needs, wishes and preferences of women veterans. Are additional changes being considered?

Answer: An additional buyer was hired to concentrate on women's wear. Basic reorderable programs were offered to the canteens in classifications such as pantyhose, daywear, dusters, and pajamas. This enabled even the smallest location to order these essential items in small quantities on an on-going basis. Vendors were chosen for these programs that offered excellent quality at true values. Through negotiations, many manufacturers are maintaining an in-stock inventory to support the Veterans Canteen Service (VCS) program. Although these listings are made available to all locations, the Veterans Canteen Service buying method allows each canteen to tailor its merchandise mix to the individual store. The greatest area of change in the VCS women's wear program has been the lowering of selling prices in every classification. This was achieved through the careful analysis of each listed manufacturer. The majority of the original vendors have been replaced by vendors offering product lines catering to our customers' needs and interests. While brand label merchandise is still obtained at promotional prices, the backbone of Veterans Canteen Service's program has been in developing merchandise with much lower selling prices.

Another way the VCS is emphasizing the women's program is by having the buyer frequently travel to the New York market. This keeps the Service abreast of new trends and items that should be developed for canteens. Special promotional merchandise which is obtained during these visits is made available to all canteens.

One new category being tested in the canteens is costume jewelry. This classification is regarded as a morale booster for women patients and is a gift giving resource for long-term patients.

CONGRESSMAN EVANS

Question:	3. Please describe the orientation and support given to Women Veteran Coordinators.
Answer:	Two national meetings for Women Veteran Coordinators were held in August 1985 and 1986. Each VAMC received an invitation to send its Coordinator to one or both of the meetings. The Coordinators receive regular mailings which include VA Advisory Committee on Women Veterans meeting minutes and reports, Regional Coordinator's newsletters and hot line minutes, VA pamphlets and posters, press releases and clippings about women veterans, VA statistical publications and policy statements. When VACO is notified by the local facility of a change in coordinator, a packet is sent to the new coordinator with these materials enclosed. They are also given a list of coordinators at other VA facilities and the name and telephone numbers of people in VACO responsible for the program.

Hon. Bob Stump to Veterans' Administration

CONGRESSMAN STUMP

Question: 1. What are the most common service-connected disabilities suffered by female veterans; please provide a statistical breakdown of disabilities of female veterans, if available.

Answer: Information on the disabilities for which female veterans receive service-connected compensation exists in the DVB computerized data base. A program is being written now to retrieve this information. As soon as it is available, a statistical breakdown of disabilities affecting female veterans will be provided.

Question: 2. Your prepared statement mentions the need to improve services for women veterans in VA nursing homes and domiciliaries. Construction plans for the VA Medical Center in Prescott, Arizona include a new nursing home and a new domiciliary. I would like to request unanimous consent, Mr. Chairman, to include a question for the record asking Dr. Gronvall how the VA plans to provide for the needs of women veterans in the construction of those new facilities?

Answer: Current planning criteria ensure that all new VA Domiciliary and Nursing Home Care units will meet the needs of female veterans as well as all other veterans seeking admission to these facilities.

Statistics based on 1985 data indicate that approximately 2% of all veterans occupying beds in VA medical centers are female. In Domiciliary and Nursing Home Care Units, a significant portion (8% Domiciliary and 10% NHC) of the total beds will be one-bed (private) rooms. All remaining bed rooms will be two-bed (semi-private) rooms.

Private toilet facilities (water closet and lavatory) are provided for two of the one-bed rooms and one of the two-bed rooms on each ward. The remaining rooms will have toilet facilities shared between two rooms.

Bathing facilities with four showers and two tubs are available on each unit and an additional full wheelchair bathroom will be provided on each unit.

CHAIRMAN EVANS TO DEPARTMENT OF LABOR

U.S. Department of Labor

Office of the Secretary
Women's Bureau
Washington, D.C. 20210

MAY 1 8 1987

Honorable Lane Evans
Chairman
Subcommittee on Oversight and
  Investigations
Committee on Veterans' Affairs
U.S. House of Representatives
Washington, D.C. 20515

Dear Congressman Evans:

This is in response to your letter of April 24 enclosing certain questions in connection with my testimony before your Subcommittee on April 2 and requesting my response to them. I appreciated the opportunity to present testimony on employment opportunities of women veterans.

I am herewith providing my responses in the format you requested.

Sincerely,

Collis N. Phillips
for SHIRLEY M. DENNIS
Director

Enclosure

Q. (1) Recently, the Women's Bureau sponsored a conference for women veterans in Philadelphia. What were the results of the conference? Does the Women's Bureau plan to sponsor additional conferences for women veterans in the future?

A. On March 21, 1987, the Women's Bureau and Temple University cosponsored a conference for women veterans, "Using Your Military Past to Shape Your Future." Our regional administrator arranged for a panel discussion of veterans preference in State, local and Federal civil service and held a workshop on employment. The participants' evaluations of the conference were very positive and they expressed an interest in meeting again in a smaller group.

The Women's Bureau has no present plans to sponsor additional conferences of the same kind. However, we will take such conferences into consideration in our planning for future activities involving women veterans.

Q. (2) Are women veterans being employed as a result of the affirmative action requirement of Section 2012, title 38, U.S.C.? What statistical information is available on employment of women veterans by contractors?

A. Sec. 2012 requires Federal contractors with Federal contracts of $10,000 or more for the procurement of personal property and non-personal services to take affirmative action to employ and advance in employment qualified special disabled veterans and veterans of the Vietnam era.

The Veterans Employment and Training Service (VETS) gathers data from employment service offices on the number of veterans they place with Federal contractors. However, these data are not broken down by sex. In 1988 all Federal contractors will be reporting to VETS on the number of special disabled and Vietnam era veterans they hire. However, these data will not be broken down by sex.

Q. (3) Please describe the Department of Labor's outreach activities to women veterans. Are these activities effective? How is effectiveness determined?

First, as I stated in my testimony, all the services available to any veteran through the Office of the Assistant Secretary for Veterans' Employment and Training are available to women veterans. The Employment Service gathers data on the total number of applicants for its services by sex. One measure of the effectiveness of the Department of Labor's outreach activities to veterans in general, including women veterans, would be an increase in the total number of applicants. Women applicants increased by 1.74 percent between the first two quarters of program year 1985 (starting July 1, 1985) and the first two quarters of program year 1986.

More specifically, as I also stated in my testimony, the Women's Bureau has taken some steps to remedy the women veterans' apparent lack of information about what services are available to them.

For example, the Women's Bureau arranged to have the Veterans Administration pamphlet "Women Are Veterans Too" distributed through the employment service system and through the Women's Bureau's 10 regional offices. The pamphlet describes a variety of veterans benefits women veterans may be eligible for, including medical care, readjustment counseling, disability compensation, pensions, educational assistance, vocational rehabilitation, home loans, death benefits, and employment assistance.

In October 1984, the Women's Bureau regional office in Philadelphia designed a packet of information to assist enlisted women separating from military service in their search for civilian employment. The packet includes information on future job opportunities and the world of work, on apprenticeship, on financial aid, and on resource organizations. It has been provided to military separation centers.

In June 1986, VETS and the Women's Bureau jointly funded the Washington State Employment Security Department to provide 40 women veterans with career planning, occupational skills training, on-the-job training, structured support groups, job search training, and individual job placement assistance. More detailed information on this Female Veteran Placement Program is contained in my testimony. At the conclusion of participant service activities, a training guide will be developed for wider use.

With regard to the future, one of the objectives of Secretary of Labor Brock's Workforce 2000 project is to enable women to participate more fully in the economy. The Veterans' Employment and Training Service has identified women veterans as one of the target groups whose needs it plans to address. This will necessitate identifying and gathering demographic and statistical data as a basis for program development. In November 1987, in cooperation with the Veterans Administration, the Bureau of Labor Statistics of the Department of Labor will conduct a survey to identify the needs of Vietnam-era veterans, by sex, with emphasis on the disabled veteran.

Q. (4) Please describe how the Department of Labor is responding to the post service employment problems experienced by women veterans.

A. As I stated in my testimony, a 1985 survey by Louis Harris Associates, commissioned by the Veterans Administration, found that women veterans are experiencing employment problems and are less inclined than men veterans to take full advantage of veterans benefits. The Department of Labor is attempting to address these problems in part through the outreach activities I described in my testimony and in response to your third question.

CHAIRMAN EVANS TO SMALL BUSINESS ADMINISTRATION

U.S. SMALL BUSINESS ADMINISTRATION
WASHINGTON, D.C. 20416

OFFICE OF THE ADMINISTRATOR

MAY 20 1987

Honorable Lane Evans
Chairman
Subcommittee on Oversight
and Investigations
Committee on Veterans' Affairs
House of Representatives
Washington, D.C. 20515

Dear Mr. Chairman:

This is in response to your inquiry of April 27, 1987, requesting the Small Business Administration to respond to additional questions members of the Subcommittee had on women veterans. As requested, I have enclosed our responses.

I do want to thank you for the courtesy you extended to Dick Ellis, Director of Veterans Affairs, when he represented me at your hearing on April 2. We have started to move forward with this program and I am confident that, given a few months, you will see some results.

Sincerely,

James Abdnor
Administrator

Enclosure

OVERSIGHT AND INVESTIGATIONS SUBCOMMITTEE
QUESTIONS ON WOMEN VETERANS

(1) Will women veterans be encouraged to participate in the five major training projects launched by SBA Veterans Affairs this year? How many women veterans have participated in the pilot entrepreneurial courses in South Carolina?

All veterans including women veterans are encouraged to participate in all SBA training programs. Considerable effort was made by the South Carolina District Office of SBA, South Carolina Department of Veterans Affairs and State Employment Security Commission to recruit women veterans for the pilot program. Two women started the training course, but unfortunately both chose not to complete the program. Special attention has been called to recruiting women veterans for the five new programs started this year.

(2) Please describe the SBA's outreach activities to women veterans. Are these activities effective? How is effectiveness determined?

First, SBA has a special Office of Women's Business Ownership that is assisting the Office of Veterans Affairs to service women veterans. During the last quarter of 1986, more than 130 conferences and seminars were sponsored by the Office of Women's Business Ownership. This year, nine conferences are scheduled nationwide for women on "Financial Decisionmaking" and later in the year 10 conferences on "Business Expansion".

In the past, women were never asked if they were veterans, but starting in 1987, a special blank has been added to women's conference registration forms asking their military status.

Women veterans are given full assistance by the SBA Office of Veterans Affairs when they identify themselves as such, but it is felt in most cases they attend Women's Business Ownership Conferences without divulging their military background.

(3) Please describe how the SBA is responding to the post-service employment problems experienced by women veterans?

The SBA has no direct responsibility with respect to employment problems which are the joint responsibility of the Department of Labor and the Veterans Administration. We have consistently cooperated with these Agencies, as requested. We have volunteered to participate in any formal efforts they might initiate.

HON. BOB STUMP TO SMALL BUSINESS ADMINISTRATION

(4) What is SBA's position on the suggested outreach program for women veterans?

A meeting was held in mid 1986 with Mary Stout of the Vietnam Veterans of America Association and Carol Crockett, SBA's Director of Women's Business Ownership, to discuss the possibility of cosponsoring a national or series of workshops or conferences for women veterans. It was basically decided at that time that no one had statistics or demographics on the location of the largest area of women veterans in the country to locate such a pilot project. It was thought that Boston may be a likely area. Discussions were held with the Boston area Regional Administrator who has agreed to host a pilot project.

Due to the change of administration within the SBA and the Office of Veterans Affairs, this project is temporarily on hold at this time.

The appointment of a Regional Veterans Affairs Officer in the Boston area within the next 60 days could revive the idea.

CHAIRMAN EVANS TO AMERICAN VETERANS' COMMITTEE

AMERICAN VETERANS COMMITTEE
"CITIZENS FIRST, VETERANS SECOND"

NATIONAL OFFICE • 1717 MASSACHUSETTS AVE., N.W. • SUITE 203 • WASHINGTON, D.C. 20036 • 202-667-0090

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May 4, 1987

Hon. Lane Evans, Chairman
Subcommittee on Oversight and Investigations
Committee on Veterans Affairs
U.S. House of Representatives
335 Cannon House Office Building
Washington, DC 20515

Dear Chairman Evans:

Thank you kindly for your letter of April 24th requesting further information regarding the concerns and needs of women veterans.

I am pleased to enclose the answers to your questions, in the form you requested.

Sincerely,

June A. Willenz
Executive Director

Enclosure

To achieve a more democratic and prosperous America and a more stable World

ADDITIONAL QUESTIONS FOR JUNE WILLENZ

QUESTION 1: Is additional research needed on the subject of post-service employment of women veterans?

ANSWER: No research on the subject of post-service employment of women veterans has been done beyond the exploratory study by the American Veterans Committee for the Women's Bureau in 1985 on a select group of women veterans who had come to the public employment offices seeking assistance in their job search. That study indicated that the military service of that particular group of women veterans did not seem to impact positively on their post-service employment, either on the kinds of jobs they got or on their wages. Despite their military experiences, these women earned hourly wages at the lower end of the earning spectrum. Considering the relatively high educational level of these women, this was not anticipated. This 1985 study only looked at the records of the women veterans from the so-called better performing states. It can be inferred that if the lesser performing states had been included the picture would be even more dismal.

It might be useful to compare parallel groups of male veterans with the women veterans who come into the public employment offices, to see whether the women's experiences are different from the male veterans. Also, it might be important to do a sampling of all the states no matter how they are ranked as far as placement ratios were concerned, and examine the results.

Another study that would be useful would be to take a stratified sampling of women veterans from all public employment offices, including those placed and not placed. Control groups of non-veterans would be used in this study.

Still another approach would be to interview a select group of women veterans whose records have been studied to ascertain the reasons for their choices and their reactions to their placements. Such an indepth survey would give us a better picture of the problems faced by these women.

A more complex study would be to conduct a longitudinal survey lasting from two to five years, which would involve interviewing a sample of separating enlisted women and follow up with surveys -- six months, one year, two years, even five years later -- to investigate their employment goals and actual job experiences. That could be followed by a limited-in-depth interview sampling which would probe what the reasons were for these experiences.

Several pilot studies could be initiated to determine whether better records, different procedures or innovative techniques would improve the placement ratio as well as the earnings of the women veterans. A few local employment offices would be selected where different record keeping would be initiated. Also, target job readiness seminars, special counseling, peer group sessions would be tried and the results compared to previous performances.

All these suggestions for studies particularly relate to the women veterans who come into the public employment offices (except for the longitudinal survey). These and other studies are called for if we are to understand the failures and the disappointing job placements of the women veterans who seek employment after military service. It is crucial to identify the factors that contribute to the successful placement of women veterans commensurate to their trainings, experience, and aspirations. Only after further research is done can the proper services and programs be fine-tuned to meet the particular needs of the women veterans in need of assistance with their job search.

Additional Questions for June Willenz (continued)

QUESTION 2: You testified services for women veterans at public employment offices could be upgraded and targeted. Which services could be targeted and upgraded? What additional resources would be needed?

ANSWER: There is no assurance that women veterans are always recognized as women veterans. Societal and cultural forces are always present; women are not always thought of in terms of "veteran" status. Therefore, all women should be asked at the "reception desk" if they are veterans. They can then be directed to the "veterans unit" where they will be given the special services that are offered to veterans.

Data collection on the applicants varies considerably from employment office to employment office. It was noted that in many instances very little information is taken on military experiences and trainings. We don't know whether this phenomenon only applies to women veterans, or whether it is equally applicable for the male veterans. More information on the records may be useful in the referral and placement process, particularly in relating the military experience to potential civilian employment.

Women veterans, who are considered easy to place, are not viewed as a distinctive client population. The "easy to place" perception may have to do more with the needs and vulnerabilities of the applicants than with the characteristics of proper placements. Women veterans of different age groups may have different employment histories and objectives than male veterans of parallel age groups. These should be taken into account during the intake and referral/placement processes. The staffs of the public employment offices who deal with women veterans may need specific training in servicing this group of veterans.

Increased outreach efforts are needed. Job fairs, different modes of outstationing, special sessions in "job readiness," "job search preparation" geared to women veterans should be developed. The special needs and objectives of women veterans need to be studied and formulated so that special outreach methods can be adapted for them. Other modalities of outreach using the media, such as public service announcements on radio and TV; employer's seminars, forums with various community groups need to be explored as aids to the proper placement of women veterans. Further outreach to women veterans groups, women's organizations, employers of large numbers of women, and other community agencies may help raise awareness of the women veterans population and their employment problems.

Concern and interest in women veterans' job problems should be promoted among the veterans organizations. Leadership of women veterans within these organizations needs encouragement. Women veterans have generally been submerged within the larger male enclaves. Rarely, if at all, are women veterans consulted when ongoing services and programs for veterans are discussed and formulated. The public and private sector agencies that deal with veterans should be made aware of women veterans and of their special needs and objectives. If there are ad hoc women veterans groups or women veterans organizations, they should be welcomed into the councils of veterans' policy development on the local level.

One or more "demonstration projects" should be initiated -- jointly run by the local public employment office, the State Security Agency and the VETS (Veterans Employment and Training Service of the Department of Labor) to outreach and develop some of the methods outlined above as ways of enhancing the employment services and opportunities for women veterans in the public employment offices.

CHAIRMAN EVANS TO COMMONWEALTH OF MASSACHUSETTS

The Commonwealth of Massachusetts
Executive Office of Human Services
Office of Commissioner of Veterans' Services
Leverett Saltonstall Building, Government Center
100 Cambridge Street, Boston 02202

MICHAEL S. DUKAKIS
GOVERNOR

JOHN HALACHIS
COMMISSIONER

May 6, 1987

MAY 13 1987

Congressman Lane Evans
Chairman
Subcommittee on Oversight
and Investigations
U.S. House of Representatives
335 Cannon House Office Building
Washington, D. C. 20515

Dear Congressman Evans:

Enclosed are the questions restated relating to the Subcommittee on Oversight and Investigations hearing on the Status and Concerns of Women Veterans, held on April 2, 1987.

If I can be of further service to you and your Subcommittee on women veterans, please feel free to contact me at the State Veterans' Services.

Sincerely,

Jannette Tappan

Jannette Tappan
Women Veteran's Coordinator
State Veterans' Services

Enclosure

cc: Commissioner John Halachis

Memo To: Congressman Lane Evans, Chairman, Subcommittee on Oversight and Investigations

From: Jannette Tappan, Women Veteran's Coordinator
The Commonwealth of Massachusetts

Date: May 6, 1987

Subject: Restated Questions

Questions Requested Restated:

1. "You testified in support of a team apprach for outreach to women veterans. Please describe your proposal for a team approach to outreach (Part I). Which agencies and organizations would participate? (Part II). What is the current status of the proposal? (Part III)."

   RESPONSE PART I: The Federal Government should develop a data base of women veterans listings (name, address, telephone number, era, etc.,) of which a national directory can be created for a team approach to reach-out to women veterans.

   RESPONSE PART II: We recommend that all federal (i.e. Women's Bureau, DOL), state (i.e. Veterans' Services) and service organization (i.e. The American Legion, DAV., etc.).participate in the program. Also, each state should appoint a Women Veterans Coordinator to support all women veteran's programs.

   RESPONSE PART III. At the present time, this proposal will have to be reviewed by Commissioner John Halachis before any further steps are taken and recommendations are submitted to the Veterans Administration for further action.

Questions Requested Restated:

" Please provide more information on "satellite centers" for women veterans (Part I). How many centers will be established? (Part II). What services will be provided? (Part III).

RESPONSE PART I: "Satellite centers and Outreach Centers" mean the same.

RESPONSE PART II: There are already seven (7) State Veterans Outreach Centers and seven (7) Federal Outreach Centers in Massachusetts.

RESPONSE PART III: Utilzing the existing State Veterans Outreach Centers, a member of the Commissioner's Advisory Committee On Women Veterans will be available to women veterans to discuss any female-oriented problems and concerns of women veterans in their Region.

Then refer the women veterans to the proper agency.